Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF CALIFORNIA REVISED PLAN 6/2016	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	George First name C. Middle name Hebert Last name and Suffix (Sr., Jr., II, III)	Holly First name L. Middle name Hebert Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	George Christopher Hebert	Holly L. Kay Holly Lynn Hebert
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4242	xxx-xx-7173

Case 20-04403-CL7 Filed 08/31/20 Entered 08/31/20 16:44:33 Doc 1 Pg. 2 of 75

	btor 1 George C. Hebert Holly L. Hebert		Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		9537 Rawlins Way Santee, CA 92071	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		San Diego	- Country
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 20-04403-CL7 Filed 08/31/20 Entered 08/31/20 16:44:33 Doc 1 Pg. 3 of 75

Debtor 1 George C. Hebert Debtor 2 Holly L. Hebert				Case number (if known)					
Par	rt 2:	Tell the Court About \	our Ban	kruptcy Ca	ase				
7. The chapter of the Bankruptcy Code you are					orief description of each, see go to the top of page 1 and c			C.C. § 342(b) for Individu	uals Filing for Bankruptcy
	choc	sing to file under	■ Cha	pter 7					
			☐ Cha	pter 11					
			☐ Cha	pter 12					
			☐ Cha	pter 13					
8.	How	you will pay the fee	al oı	oout how yo	e entire fee when I file my pe ou may pay. Typically, if you a attorney is submitting your pa address.	re paying	the fee yourself,	you may pay with cash	ı, cashier's check, or money
					y the fee in installments. If ye in Installments (Official For		e this option, sign	and attach the Applica	ation for Individuals to Pay
			□ I i	request that ut is not req	It my fee be waived (You ma uired to, waive your fee, and ur family size and you are una	ay reques may do s	o only if your inco	me is less than 150% of	of the official poverty line that
			th	e Application	on to Have the Chapter 7 Filin	ng Fee Wa	aived (Official For	m 103B) and file it with	your petition.
9.		you filed for ruptcy within the	□ No.						
		last 8 years?	Yes.						
				5	Central District of	144	8/17/12		6.42 bk 20202 MW
				District	California- Riverside	When	0/1//12	Case number	6:12-bk-29202-MW
				District		_ When When		Case number	
				District		_ vviien		Case number	
10.		any bankruptcy	■ No						
	filed not f you,	s pending or being by a spouse who is iling this case with or by a business ner, or by an ate?	☐ Yes.						
				Debtor				Relationship to y	ou
				District		_ When		Case number, if	
				Debtor				Relationship to y	
				District		_ When		Case number, if	known
11.		ou rent your	□ No.	Go to I	ine 12.				
	resid	lence?	■ Yes.	Has yo	our landlord obtained an evicti	ion judgm	ent against you?		
			. 00.	_	No. Go to line 12.				
				_	Yes. Fill out <i>Initial Statemen</i> bankruptcy petition.	t About a	n Eviction Judgm	ent Against You (Form	101A) and file it with this

Case 20-04403-CL7 Filed 08/31/20 Entered 08/31/20 16:44:33 Doc 1 Pg. 4 of 75

	George C. Hebert Holly L. Hebert			Case number (if known)		
Par	Papart About Any Ru	sinossos	You Own as a Sole Pr	onrieter		
Гаі	to. Report About Arry Bu	311163363	Tou Own as a Sole Fi	орпето		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	No. Go to Part 4.			
		☐ Yes.	Name and location	of business		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business,	if any		
If you have more than one sole proprietorship, use a				y, State & ZIP Code		
	separate sheet and attach it to this petition.		Check the appropri	ate box to describe your business:		
	,			Business (as defined in 11 U.S.C. § 101(27A))		
				t Real Estate (as defined in 11 U.S.C. § 101(51B))		
				(as defined in 11 U.S.C. § 101(53A))		
				Broker (as defined in 11 U.S.C. § 101(6))		
			☐ None of the			
13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as debtor or a debtor as defined by 11 U.S.C. § 1182(1)?				that it can set appropriate deadlines. If you indicate that you are a small business debtor or der Subchapter V, you must attach your most recent balance sheet, statement of operations,		
	For a definition of small	■ No.	I am not filing under	Chapter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Ch Code.	apter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.		apter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and roceed under Subchapter V of Chapter 11.		
		☐ Yes.		apter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I under Subchapter V of Chapter 11.		
Par	t 4: Report if You Own or	Have Any	Hazardous Property	or Any Property That Needs Immediate Attention		
14.	Do you own or have any property that poses or is	■ No.				
	alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?			
	identifiable hazard to public health or safety?					
	Or do you own any property that needs immediate attention?		If immediate attention needed, why is it need			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property			
				Number, Street, City, State & Zip Code		

Debto Debto					Case number (if known)	
Part 5		o Re	ceive a Briefing About Credit Counseling		· · · · · · · · · · · · · · · · · · ·	
			out Debtor 1:	Abo	out Debtor 2 (Spouse Only in a Joint Case):	
y b c	ell the court whether ou have received a riefing about credit ounseling.	You	must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.	You ■	I must check one. I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate o	
r	he law requires that you eceive a briefing about redit counseling before		Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.		Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.	
Y O C S	ou file for bankruptcy. 'ou must truthfully check ne of the following hoices. If you cannot do o, you are not eligible to		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificat of completion.	
If C	you file anyway, the court an dismiss your case, you		Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.		Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.	
wi yo cre	vill lose whatever filing fee rou paid, and your reditors can begin collection activities again.	nd your		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.
			To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.		To ask for a 30-day temporary waiver of the requirement attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. Your case may be dismissed if the court is dissatisfied	
			Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.		with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.	
			Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.		·	
			I am not required to receive a briefing about credit counseling because of:		I am not required to receive a briefing about credit counseling because of:	
			☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.	
			Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.	

Active duty.

combat zone.

I am currently on active military duty in a military

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Active duty.

I am currently on active military duty in a

If you believe you are not required to receive a briefing about credit counseling, you must file a

motion for waiver credit counseling with the court.

military combat zone.

Case 20-04403-CL7 Filed 08/31/20 Entered 08/31/20 16:44:33 Doc 1 Pg. 6 of 75

	tor 1 George C. Hebert Holly L. Hebert				Case number	(if known)		
Part	6: Answer These Questi	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
	,		□ No. Go to line 16b.					
			■ Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe t	that are not consu	mer debts or business	debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. G	Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do y are paid that funds will be available			rty is excluded and administrative expenses		
	administrative expenses are paid that funds will		■ No					
	be available for distribution to unsecured creditors?		Yes					
18.	How many Creditors do you estimate that you owe?	1 -49		1 ,000-5,000)	□ 25,001-50,000		
		☐ 50-99)	5001-10,000	0	5 0,001-100,000		
		□ 100-1 □ 200-9		□ 10,001-25,0	00	☐ More than100,000		
19.	How much do you	□ \$0 - \$	250,000	П \$1 000 001	\$10 million	□ \$500,000,001 - \$1 billion		
	estimate your assets to		001 - \$100,000		□ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion □ \$10,000,001 - \$10 billion □ \$1,000,000,001 - \$10 billion			
	be worth?		,001 - \$500,000	□ \$50,000,00°	□ \$10,000,000,001 - \$50 billion			
		□ \$500,	,001 - \$1 million	□ \$100,000,00	01 - \$500 million	☐ More than \$50 billion		
20.	How much do you	□ \$0 - \$	\$50,000	□ \$1,000,001	- \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?	□ \$50,0	001 - \$100,000	□ \$10,000,00°	1 - \$50 million	□ \$1,000,000,001 - \$10 billion		
	to be:		,001 - \$500,000	□ \$50,000,00°		□ \$10,000,000,001 - \$50 billion		
		□ \$500,	,001 - \$1 million	□ \$100,000,00	01 - \$500 million	☐ More than \$50 billion		
Par	: 7: Sign Below							
For	you	I have ex	xamined this petition, and I declare	under penalty of p	perjury that the informa	ation provided is true and correct.		
			chosen to file under Chapter 7, I a states Code. I understand the relief		, , ,	under Chapter 7, 11,12, or 13 of title 11, pose to proceed under Chapter 7.		
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					an attorney to help me fill out this		
		I request	t relief in accordance with the chap	oter of title 11, Unit	ed States Code, speci	fied in this petition.		
			tcy case can result in fines up to \$2			property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		/s/ Geo	rge C. Hebert		/s/ Holly L. Heber	rt		
		George	e C. Hebert e of Debtor 1		Holly L. Hebert Signature of Debtor			
		Executed	August 4, 2020 MM / DD / YYYY			ust 4, 2020 DD / YYYYY		

Case 20-04403-CL7 Filed 08/31/20 Entered 08/31/20 16:44:33 Doc 1 Pg. 7 of 75

Debtor 1 Debtor 2 George C. Hebert Holly L. Hebert		Case number (if known)			
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unifor which the person is eligible. I also certify	ted States Code, and have e that I have delivered to the	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)		
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applie schedules filed with the petition is incorrect.	s, certify that I have no know	vledge after an inquiry that the information in the		
. 0	/s/ Ahren A. Tiller	Date	August 4, 2020		
	Signature of Attorney for Debtor		MM / DD / YYYY		
	Ahren A. Tiller 250608				
	Printed name				
	Bankruptcy Law Center				
	Firm name				
	1230 Columbia St., Suite 1100				
	San Diego, CA 92101				
	Number, Street, City, State & ZIP Code				
	Contact phone 619-894-8831	Email address			
	250608 CA				
	Bar number & State				

	Case 20-04403-CL7 Filed 08/31/20 Enter	ed 08/31/20 16:44:33 Doc 1	Pg.	8 01 /5
Fill in thi	nis information to identify your case:			
Debtor 1	George C. Hebert			
Dahtaro		Last Name		
Debtor 2 (Spouse if, f	y =	Last Name		
United St	SOUTHERN DISTRICT OF CALI 6/2016	FORNIA REVISED PLAN		
Case nur	imber			
(if known)			_	k if this is an nded filing
Summ Be as cor information your original	al Form 106Sum nary of Your Assets and Liabilities and Cer omplete and accurate as possible. If two married people are filing ion. Fill out all of your schedules first; then complete the inform ginal forms, you must fill out a new Summary and check the box	g together, both are equally responsible fo ation on this form. If you are filing amende		
Part 1:	Summarize Your Assets			
			Your a	assets of what you own
1. Sch 1a. (hedule A/B: Property (Official Form 106A/B) Copy line 55, Total real estate, from Schedule A/B		\$	0.00
1b. (Copy line 62, Total personal property, from Schedule A/B		\$	51,688.56
1c. (Copy line 63, Total of all property on Schedule A/B		\$	51,688.56
Part 2:	Summarize Your Liabilities			
				iabilities nt you owe
	hedule D: Creditors Who Have Claims Secured by Property (Official Copy the total you listed in Column A, Amount of claim, at the bottom		\$	57,645.44
	hedule E/F: Creditors Who Have Unsecured Claims (Official Form 10 Copy the total claims from Part 1 (priority unsecured claims) from lin		\$	7,001.87
3b. (Copy the total claims from Part 2 (nonpriority unsecured claims) fro	m line 6j of <i>Schedule E/F</i>	\$	65,191.18
		Your total liabilities	\$	129,838.49
Part 3:	Summarize Your Income and Expenses			
	hedule I: Your Income (Official Form 106I) py your combined monthly income from line 12 of Schedule I		\$	6,063.90
	hedule J: Your Expenses (Official Form 106J)		\$	6.360.62

Part 4: Answer These Questions for Administrative and Statistical Records

- Are you filing for bankruptcy under Chapters 7, 11, or 13?
 - □ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- 7. What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Debtor 1	George C. Hebert		
Debtor 2	Holly L. Hebert	Case number (if known)	
	the court with your other schedules.		

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$______7,026.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	7,001.87
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	22,399.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	29,400.87

Fill in this info	ormation to identify your c	ase and this filing:			
Debtor 1	George C. Hebert				
.	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	Holly L. Hebert First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	SOUTHERN DISTRICT O	F CALIFORNIA REVISED PLA	AN 6/2016	
Case number					☐ Check if this is an amended filing
Schedun each category hink it fits best. If manswer every quant to the second s	Be as complete and accurate ore space is needed, attach a sestion.	items. List an asset only on as possible. If two married separate sheet to this form	ce. If an asset fits in more than o people are filing together, both a . On the top of any additional pag fou Own or Have an Interest In	are equally responsible for s	upplying correct
	Part 2. re is the property? be Your Vehicles				
someone else o		, also report it on Schedule	cles, whether they are regist e G: Executory Contracts and U		ehicles you own that
	Ukramiana			Do not deduct secured of	laims or exemptions. Put
3.1 Make:	Husqvarna FE450		st in the property? Check one	the amount of any secur	ed claims on Schedule D:
Model:	2019	Debtor 1 only		Creditors Who Have Cla	ims Secured by Property.
Year:	450	Debtor 2 only		Current value of the	Current value of the
	nate mileage: 150	Debitor Failu De	ptor 2 only ne debtors and another	entire property?	portion you own?
04101111	omaton.	At least one of the	e debiois and another		
		Check if this is (see instructions)	community property	\$6,210.00	\$6,210.00
3.2 Make: Model:	Husqvarna FX 350	Who has an interes	st in the property? Check one	the amount of any secur	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
Year:	2018	Debtor 2 only			, , ,
	nate mileage: 200		btor 2 only	Current value of the entire property?	Current value of the portion you own?
	ormation:		ne debtors and another		, ,
		Check if this is (see instructions)	community property	\$4,645.00	\$4,645.00

Debto Debto		George C. Hel Holly L. Hebe			Case numbe	er (if known)	
3.3	Other in	Ram 1500 Class 2019 imate mileage: nformation:	12000	Who has an interest in the property? Che ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	the ar Credi	mount of any secure	laims or exemptions. Put and claims on Schedule D: and Secured by Property. Current value of the portion you own?
	SLT C	Crew Cab SWI	3 2WD	■ Check if this is community property (see instructions)		\$24,736.00	\$24,736.00
	amples: E No			d other recreational vehicles, other ve tercraft, fishing vessels, snowmobiles, m			
.pa	ages you	u have attached		n for all of your entries from Part 2, inc that number here			\$35,591.00
				terest in any of the following items?			Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>E</i> >	kamples: No	d goods and fui : Major appliance escribe		, china, kitchenware			
			Household goo No item worth o	ds and furnishings over \$675			\$1,500.00
E)	No	Televisions and		eo, stereo, and digital equipment; comput nedia players, games	ters, printers, scanne	ers; music collecti	ons; electronic devices
			Misc. househole No item worth o				\$1,000.00
<i>E</i> >	kamples: No		gurines; paintings, is, memorabilia, co	prints, or other artwork; books, pictures, of	or other art objects; s	stamp, coin, or ba	seball card collections;
9. Eq <i>E</i> > ■	uipmen kamples:	t for sports and Sports, photogr musical instrur	raphic, exercise, ar	d other hobby equipment; bicycles, pool	tables, golf clubs, sk	is; canoes and ka	ayaks; carpentry tools;
10. F i	i rearms Example: No		shotguns, ammuni	tion, and related equipment			

Debtor 1 Debtor 2	George C. Hebert Holly L. Hebert		Case numb	per (if known)
☐ No		s, leather coats, de	signer wear, shoes, accessories	
■ Yes	Used	misc. wearing ap m worth over \$6		\$1,000.00
□ No		stume jewelry, enga	gement rings, wedding rings, heirloom jewelry, watc	hes, gems, gold, silver
	Misc.	Jewelry		\$100.00
Exar ■ No	farm animals nples: Dogs, cats, birds, holes. Describe	ses		
■ No	other personal and house s. Give specific information	-	not already list, including any health aids you di	d not list
	I the dollar value of all of y Part 3. Write that number		Part 3, including any entries for pages you have a	stached \$3,600.00
Part 4:	Describe Your Financial Asset	s		
Do you o	own or have any legal or e	quitable interest ir	n any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No		our wallet, in your h	ome, in a safe deposit box, and on hand when you fi	le your petition
			Cash	\$200.00
			ounts; certificates of deposit; shares in credit unions s with the same institution, list each.	, brokerage houses, and other similar
Yes	S		Institution name:	
	17.1.	Checking	Union Bank	\$1,200.00
	17.2.	Checking	Union Bank	\$35.00
	17.3.	Debit	EDD Bank of America Debit Card	\$500.00

	ebtor 1 ebtor 2	George C. Hebert Holly L. Hebert		Case number (if known)	
18.		mutual funds, or publicly traded stoc les: Bond funds, investment accounts with		counts	
	■ No □ Yes	Institution or is	suer name:		
19.		blicly traded stock and interests in inc	corporated and unincorporated bus	sinesses, including an interest	in an LLC, partnership, and
		Give specific information about them Name of entity:		% of ownership:	
		Joint debtor is engaged in real No assets.	owner of sole-proprietorship estate sales.	%	\$0.00
20.	Negotia Non-ne ■ No	ment and corporate bonds and other able instruments include personal checks gotiable instruments are those you cannot be specific information about them Issuer name:	s, cashiers' checks, promissory notes,	and money orders.	
21.	Exampl ☐ No	nent or pension accounts les: Interests in IRA, ERISA, Keogh, 401	(k), 403(b), thrift savings accounts, or	other pension or profit-sharing p	lans
	Yes. L	ist each account separately. Type of account:	Institution name:		
		401(k)	Ascensus		\$10,562.56
22.	Your sh Example No	y deposits and prepayments hare of all unused deposits you have mades: Agreements with landlords, prepaid	de so that you may continue service or rent, public utilities (electric, gas, wate Institution name or indivic	er), telecommunications compani	es, or others
23.		es (A contract for a periodic payment of			
	■ No □ Yes		, ,	, , ,	
24.	26 U.S.C	s in an education IRA, in an account in 2. §§ 530(b)(1), 529A(b), and 529(b)(1).	n a qualified ABLE program, or und	ler a qualified state tuition prog	gram.
	■ No □ Yes	Institution name and descr	ription. Separately file the records of a	any interests.11 U.S.C. § 521(c):	
	■ No	equitable or future interests in proper	rty (other than anything listed in lin	e 1), and rights or powers exer	cisable for your benefit
		Give specific information about them			
26.		, copyrights, trademarks, trade secret les: Internet domain names, websites, pr		greements	
	☐ Yes.	Give specific information about them			
27.		es, franchises, and other general intandes: Building permits, exclusive licenses,		uor licenses, professional license	s
		Give specific information about them			
M	oney or p	property owed to you?			Current value of the portion you own? Do not deduct secured

Debtor 1 Debtor 2	George C. Hebert Holly L. Hebert		Case number (if known)	
				claims or exemptions.
28. Tax re	funds owed to you			
■ No	·			
☐ Yes	Give specific information about them, i	ncluding whether you already file	ed the returns and the tax years	
29. Family	/ support			
Exam		ousal support, child support, ma	intenance, divorce settlement, property s	ettlement
■ No				
⊔ Yes	Give specific information			
	amounts someone owes you ples: Unpaid wages, disability insurance benefits; unpaid loans you made		ick pay, vacation pay, workers' compens	ation, Social Security
	Give specific information			
	sts in insurance policies ples: Health, disability, or life insurance	health savings account (HSA);	credit, homeowner's, or renter's insuranc	e
■ Yes	Name the insurance company of each			
	Company name		Beneficiary:	Surrender or refund value:
	AAA Term Lif	e Insurance		
	No cash surre	ender	Ryan Kay (child)	\$0.00
If you some No	aterest in property that is due you fro are the beneficiary of a living trust, exp one has died. Give specific information		ce policy, or are currently entitled to receive	ve property because
	s against third parties, whether or no ples: Accidents, employment disputes,			
☐ Yes	Describe each claim			
34. Other	contingent and unliquidated claims	of every nature, including cour	nterclaims of the debtor and rights to s	et off claims
■ No				
⊔ Yes	Describe each claim			
_ `	nancial assets you did not already lis	t		
■ No	Give specific information			
⊔ Yes	Give specific information		_	
	the dollar value of all of your entries art 4. Write that number here		. • •	\$12,497.56
Part 5: Do	escribe Any Business-Related Property Yo	u Own or Have an Interest In. List	any real estate in Part 1.	
37. Do yo u	own or have any legal or equitable interes	t in any business-related property	1?	
No. G	o to Part 6.			
☐ Yes.	Go to line 38.			

Debto Debto		George C. Hebert Holly L. Hebert		Case number (if known)	
Part 6		scribe Any Farm- and Commercial Fishing-Related Property Yo ou own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	st In.	
46. D o	o you	own or have any legal or equitable interest in any farm	- or commercial fishin	ng-related property?	
	No.	Go to Part 7.			
	Yes.	Go to line 47.			
Part 7	:	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
E	хатр	have other property of any kind you did not already liseles: Season tickets, country club membership	1 ?		
Ц	Yes.	Give specific information			
54. <i>I</i>	Add t	he dollar value of all of your entries from Part 7. Write the	hat number here		\$0.00
Part 8	:	List the Totals of Each Part of this Form			
55. I	Part 1	: Total real estate, line 2			\$0.00
56. I	Part 2	: Total vehicles, line 5	\$35,591.00		
57. i	Part 3	: Total personal and household items, line 15	\$3,600.00		
58. I	Part 4	: Total financial assets, line 36	\$12,497.56		
59. I	Part 5	: Total business-related property, line 45	\$0.00		
60. I	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61. I	Part 7	: Total other property not listed, line 54	+ \$0.00		
62.	Total	personal property. Add lines 56 through 61	\$51,688.56	Copy personal property total	\$51,688.56
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$51.688.56

ill in this infor	mation to identify your	case:		
Debtor 1	George C. Hebert			
	First Name	Middle Name	Last Name	
Debtor 2	Holly L. Hebert			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT 6/2016	OF CALIFORNIA REVISED PLA	۸N
Case number (if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$4,645.00		\$1,798.00	C.C.P. § 703.140(b)(2)
		100% of fair market value, up to any applicable statutory limit	
\$1,500.00		\$1,500.00	C.C.P. § 703.140(b)(3)
		100% of fair market value, up to any applicable statutory limit	
\$1,000.00		\$1,000.00	C.C.P. § 703.140(b)(3)
		100% of fair market value, up to any applicable statutory limit	
\$1,000.00		\$1,000.00	C.C.P. § 703.140(b)(3)
		100% of fair market value, up to any applicable statutory limit	
\$100.00		\$100.00	C.C.P. § 703.140(b)(4)
		100% of fair market value, up to	
	\$1,000.00	\$1,000.00 \$1,000.00 \$1,000.00	Check only one box for each exemption. \$4,645.00 \$1,798.00 100% of fair market value, up to any applicable statutory limit \$1,500.00 \$1,000.00

Official Form 106C

Debtor Debtor				Case number (if known)	
	ief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
_	ash ne from <i>Schedule A/B</i> : 16.1	\$200.00		\$200.00	C.C.P. § 703.140(b)(5)
Σ.,	ie nom conceano 702. Terr			100% of fair market value, up to any applicable statutory limit	
	hecking: Union Bank	\$1,200.00		\$1,200.00	C.C.P. § 703.140(b)(5)
Lii	ile IIIIII Schedule A.B. 17.1			100% of fair market value, up to any applicable statutory limit	
	hecking: Union Bank	\$35.00		\$35.00	C.C.P. § 703.140(b)(5)
LII	ie nom schedule A/D. 17.2			100% of fair market value, up to any applicable statutory limit	
_	ebit: EDD Bank of America Debit	\$500.00		\$500.00	C.C.P. § 703.140(b)(5)
_	ne from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
	01(k): Ascensus	\$10,562.56		\$10,562.56	C.C.P. § 703.140(b)(10)(E)
Δ,,	ie nom <i>Genedale FAB</i> . 21.1			100% of fair market value, up to any applicable statutory limit	
	re you claiming a homestead exemption ubject to adjustment on 4/01/22 and every			iled on or after the date of adjustmer	ıt.)
	Yes. Did you acquire the property cover	red by the exemption wi	ithin 1	,215 days before you filed this case	?
	☐ Yes				

					_	
Fill in this information to ident	ify your case:					
Debtor 1 George C.	Hebert					
First Name		Idle Name	Last Name			
Debtor 2 Holly L. Ho	ebert					
(Spouse if, filing) First Name	Mic	ldle Name	Last Name			
United States Bankruptcy Court		IERN DISTRICT OF C	ALIFORNIA R	EVISED PLAN		
Case number						
(if known)					☐ Check	if this is an
					amend	led filing
Official Form 106D						
Schedule D: Credi	tors Who H	Have Claims	Secure	d by Property	/	12/15
Do an annulate and accounts as no	acible If two morris	d noonlo oro filing to got	har hath are a	muallu raamanaihla far au		tion If more once
Be as complete and accurate as po- is needed, copy the Additional Page number (if known).						
1. Do any creditors have claims sec	ured by your prope	rty?				
☐ No. Check this box and si	ubmit this form to t	he court with your othe	r schedules.	ou have nothing else to	report on this form.	
Yes. Fill in all of the inform		,		· ·	•	
Part 1: List All Secured Clai	ms			Column A	Column B	Column C
List all secured claims. If a credit for each claim. If more than one cred				Amount of claim	Value of collateral	Unsecured
much as possible, list the claims in al				Do not deduct the	that supports this	portion
O. 4. Character Constal	D		Alex alatas	value of collateral.	claim	If any
2.1 Chrysler Capital Creditor's Name		ne property that secures	1	\$47,111.44	\$24,736.00	\$22,375.44
Greater & Name		m 1500 Classic 120 w Cab SWB 2WD	ou miles			
PO Box 961212		ate you file, the claim is	Check all that			
Fort Worth, TX 76161	apply. ☐ Conting	ont				
Number, Street, City, State & Zip Co	_					
rumber, enect, enty, enace a zip ec	Dispute					
Who owes the debt? Check one.		lien. Check all that apply.				
Debtor 1 only	_	ement you made (such as	mortgage or se	cured		
Debtor 2 only	car loai		0 0			
■ Debtor 1 and Debtor 2 only	☐ Statutor	y lien (such as tax lien, me	echanic's lien)			
☐ At least one of the debtors and ar	other	nt lien from a lawsuit				
■ Check if this claim relates to a community debt		ncluding a right to offset)	Auto Loar	1		

Date debt was incurred 1/2019

Last 4 digits of account number

4961

Case 20-04403-CL7 Filed 08/31/20 Entered 08/31/20 16:44:33 Doc 1 Pg. 19 of 75

Debtor 1	George C. Hebert		Case number (if known)		
	First Name Middle	Name Last Name			
Debtor 2	Holly L. Hebert First Name Middle	Name Last Name			
	riist Name iviiddie	name Last Name			
2.2 Fre	eedom Road Financial	Describe the property that secures the claim:	\$2,847.00	\$4,645.00	\$0.00
Cred	ditor's Name	2018 Husqvarna FX 350 20000 miles			
45.	45 W 00 - 1 01 01 -				
	15 W 22nd St., Ste. 0W	As of the date you file, the claim is: Check all tha	 t		
	ık Brook, IL 60523	apply. Contingent			
Num	nber, Street, City, State & Zip Code	☐ Unliquidated			
Who owe	es the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor	r 1 only	☐ An agreement you made (such as mortgage o	r secured		
☐ Debtor	r 2 only	car loan)			
Debto	r 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lier	٦)		
☐ At leas	st one of the debtors and another	☐ Judgment lien from a lawsuit			
	c if this claim relates to a nunity debt	Other (including a right to offset)	ycle Loan		
Date debt	t was incurred	Last 4 digits of account number 01	81		
231	ECRB/KTM Retail	Describe the property that secures the claim:	\$7,687.00	\$6,210.00	\$1,477.00
Cred	ditor's Name	2019 Husqvarna FE450 15000 miles			
Or	BOX 965001 lando, FL 32896	As of the date you file, the claim is: Check all the apply. Contingent	t		
Num	nber, Street, City, State & Zip Code	Unliquidated			
Who ow	es the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor	r 1 only	An agreement you made (such as mortgage o car loan)	r secured		
Debtor	r 2 only r 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lier	1)		
	st one of the debtors and another	☐ Judgment lien from a lawsuit	''		
■ Check	t if this claim relates to a nunity debt	5	ycle Loan		
Date debt	t was incurred <u>8/2/2019</u>	Last 4 digits of account number 00	28		
Add the	dollar value of your entries in	Column A on this page. Write that number here:	\$57,645.44	1	
	-	d the dollar value totals from all pages.	\$57,645.44	1	
Write th	at number here:	· ·	→5.44,1c¢	1	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this informati	on to identify your ca	250:								
		ase.								
	George C. Hebert First Name	Middle Name	Last Nam	•		_				
		wilddie Name	Last Nam	е						
_	Holly L. Hebert First Name	Middle Name	Last Nam	e		_				
(opeass,g)										
United States Bankru		SOUTHERN DISTR 6/2016	RICT OF CALIFORNI	A REVISE	ED PLAN	_				
Case number										
(if known)								Check i	if this is ar	I
								amende	ed filing	
Be as complete and acc any executory contract Schedule G: Executory Schedule D: Creditors eft. Attach the Continuname and case number	: Creditors Who curate as possible. Use its or unexpired leases the Contracts and Unexpire Who Have Claims Securiation Page to this page. If known).	Part 1 for creditors w nat could result in a c ed Leases (Official Fo red by Property. If mo . If you have no inforn	ith PRIORITY claims a laim. Also list executo orm 106G). Do not inclu re space is needed, co	nd Part 2 fory contracude any cre	ets on Schedule editors with part rt you need, fill it	A/B: Propingles in A/B: Propingles in A/B: Propingles in A/B: A/B: A/B: A/B: A/B: A/B: A/B: A/B:	perty (Offi ured claim mber the e	icial Forr ns that a entries in	n 106A/B) re listed in the boxes	party to
 Do any creditors h No. Go to Part 2 Yes. List all of your pridentify what type opossible, list the classification. 	nave priority unsecured	claims against you? If a creditor has more t both priority and nonpraccording to the creditor.	riority amounts, list that or or's name. If you have m	claim here a	and show both pri	ority and	nonpriority	/ amount	s. As much	as
 Do any creditors here in the property of the prop	nave priority unsecured 2. ority unsecured claims. f claim it is. If a claim has aims in alphabetical order	claims against you? If a creditor has more to both priority and nonpraccording to the crediticular claim, list the other.	riority amounts, list that or or's name. If you have mer er creditors in Part 3.	claim here a nore than tw	and show both pri	iority and red claim	nonpriorityns, fill out the	/ amount	s. As much uation Pag Nonpriori	as e of
 Do any creditors here in the property of the prop	ority unsecured claims. It claim it is. If a claim has alims in alphabetical order one creditor holds a partial of each type of claim, see	claims against you? If a creditor has more to both priority and nonpraccording to the credite icular claim, list the other the instructions for the	iority amounts, list that or's name. If you have mer creditors in Part 3. is form in the instruction	claim here a nore than tw booklet.)	and show both privo priority unsecu	iority and red claim P	nonpriority mount	y amount: ne Contin	s. As much uation Pag	as e of
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 Do any creditors here in the property of the prop	ority unsecured claims. If claim it is. If a claim has aims in alphabetical order one creditor holds a partial of each type of claim, see	If a creditor has more to both priority and nonpraccording to the crediticular claim, list the other the instructions for the Last 4 digital claims.	iority amounts, list that or's name. If you have mer creditors in Part 3. is form in the instruction	claim here a nore than tw booklet.)	and show both privo priority unsecu Total claim	iority and red claim P	nonpriority mount	y amount: ne Contin	s. As much uation Pag Nonpriori	as e of
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1. Do any creditors It Is No. Go to Part 2 Yes. 2. List all of your prividentify what type of possible, list the clar Part 1. If more than (For an explanation) Franchise Priority Creditor MS A340 P.O. Box 2 Sacrament Number Street Who incurred the Debtor 1 only Debtor 2 only Debtor 1 and Is At least one of	ority unsecured claims. If claim it is. If a claim has aims in alphabetical order one creditor holds a particular of each type of claim, secured or's Name 952 10, CA 95812 10 (City State Zip Code e debt? Check one.	If a creditor has more to both priority and nonpraccording to the creditor icular claim, list the other than the instructions for the Last 4 dig. When was As of the company of the Conting Unliquical Dispute Type of PF	riority amounts, list that or's name. If you have mer creditors in Part 3. is form in the instruction its of account number the debt incurred? date you file, the claim gent dated ed RIORITY unsecured claim	blaim here a nore than two booklet.) 4242 2017, 2 is: Check a	Total claim \$75 2019 all that apply	iority and red claim P	nonpriority mount	y amount: ne Contin	s. As much uation Pag Nonpriori	as e of
1. Do any creditors have been supposed by the composition of the compo	ority unsecured claims. If claim it is. If a claim has aims in alphabetical order one creditor holds a particular of each type of claim, secured by the control of the cont	If a creditor has more to both priority and nonpraccording to the creditor icular claim, list the other than the instructions for the Last 4 digital When was As of the conting Unliquid Dispute Type of PF Domesity debt	riority amounts, list that or's name. If you have mer creditors in Part 3. is form in the instruction its of account number the debt incurred? date you file, the claim gent dated ad RIORITY unsecured cla tic support obligations	booklet.) 4242 2017, 2 is: Check a	Total claim \$75 2019 all that apply	Prair	nonpriority mount	y amount: ne Contin	s. As much uation Pag Nonpriori	as e of
1. Do any creditors P No. Go to Part 2 Yes. 2. List all of your pridentify what type of possible, list the clar Part 1. If more than (For an explanation) 2.1 Franchise Priority Creditor MS A340 P.O. Box 2 Sacrament Number Street Who incurred the Debtor 1 only Debtor 2 only Debtor 1 and I At least one of	ority unsecured claims. If claim it is. If a claim has aims in alphabetical order one creditor holds a particular of each type of claim, secured by the control of the cont	If a creditor has more to both priority and nonpraccording to the creditor icular claim, list the other than the instructions for the Last 4 digital When was As of the conting Unliquid Dispute Type of PF Domesity debt	riority amounts, list that or's name. If you have mer creditors in Part 3. is form in the instruction its of account number the debt incurred? date you file, the claim gent dated ed RIORITY unsecured cla tic support obligations and certain other debts y for death or personal in	booklet.) 4242 2017, 2 is: Check a	Total claim \$75 2019 all that apply	Prair	nonpriority mount	y amount: ne Contin	s. As much uation Pag Nonpriori	as e of

	1 George C. Hebert 2 Holly L. Hebert		Case nun	mber (if known)		
2.2	Internal Revenue Service	Last 4 digits of account number	4242	\$6,244.57	\$6,244.57	\$0.00
	Priority Creditor's Name Centralized Insolvency Oper.	When was the debt incurred?	2017-2019	9		
	PO Box 7346					
	Philadelphia, PA 19101-7346 Number Street City State Zip Code	As of the date you file, the claim	is: Chook all t	that apply		
w	ho incurred the debt? Check one.	Contingent	is. Check all t	шаг арріу		
	Debtor 1 only	_				
	Debtor 2 only	☐ Unliquidated				
_		☐ Disputed	•			
_	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	ıım:			
	At least one of the debtors and another	☐ Domestic support obligations				
	Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the go	overnment		
Is	the claim subject to offset?	☐ Claims for death or personal inj	ury while you v	were intoxicated		
	No	Other. Specify				
	l Yes	taxes				
4. List	Yes. t all of your nonpriority unsecured claims in the ecured claim, list the creditor separately for each claim creditor holds a particular claim, list the other t 2.	aim. For each claim listed, identify wh	nat type of clain	m it is. Do not list claim	s already included in Pa	art 1. If more on Page of
4.1	All-Pro Bail Bonds	Last 4 digits of account numb	er 4407			\$3,187.50
	Nonpriority Creditor's Name	_				
	P.O. Box 131658 Carlsbad, CA 92013	When was the debt incurred?	9/2019	•		
	Number Street City State Zip Code	As of the date you file, the cla	im is: Check a	all that apply		
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsec	ured claim:			
	■ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a s	eparation agre	eement or divorce that	you did not	
	Is the claim subject to offset?	report as priority claims	3	•		
	■ No	Debts to pension or profit-sh	aring plans, ar	nd other similar debts		
	Yes	■ Other. Specify Bail bon	d			

	r 1 George C. Hebert r 2 Holly L. Hebert		Case number (if known)	
4.2	Alliance One	Last 4 digits of account number	0324	\$1,359.00
	Nonpriority Creditor's Name 6160 Misson Gorge Road Suite 300	When was the debt incurred?	2/2020	
	San Diego, CA 92120			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
		collection a	account San Diego Superior	
	Yes	Other. Specify Court Fees	- traffic tickets	
4.3	Alltran Financial, LP Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00
	PO Box 610 Sauk Rapids, MN 56379	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify collection a notice only	account Best Buy	
4.4	Ally Financial	Last 4 digits of account number	2574	\$10,221.00
	Nonpriority Creditor's Name	_		
	P.O. Box 380901 Minneapolis, MN 55438-0902	When was the debt incurred?	3/19/2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only			
	•	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Vehicle	Balance On Repossessed	

Debtor Debtor	1 George C. Hebert 2 Holly L. Hebert		Case number (if known)	
4.5	Best Buy / CBNA	Last 4 digits of account number	0693	\$2,157.00
	Nonpriority Creditor's Name 5800 South Corporate Place Sioux Falls, SD 57108	When was the debt incurred?	7/2018-2/2020	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	I Purchases	
4.6	Best Buy / CBNA	Last 4 digits of account number	5901	\$848.00
	Nonpriority Creditor's Name 5800 South Corporate Place Sioux Falls, SD 57108	When was the debt incurred?	5/2019-8/2019	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	l Purchases	
4.7	Cap1/walmart	Last 4 digits of account number	2343	\$1,444.00
	Nonpriority Creditor's Name P.O. Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	12/2015-1/202	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only			
	Debtor 2 only	☐ Contingent		
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans	a Oldiili.	
	debt ls the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other Specify Credit Card		
		- Outlot. Opcomy		

Debtor Debtor	George C. Hebert Holly L. Hebert		Case number (if known)	
4.8	Capital One Bank Nonpriority Creditor's Name	Last 4 digits of account number	4583	\$3,317.00
	P. O. Box 30281 Salt Lake City, UT 84130	When was the debt incurred?	11/2013-10/2017	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	Purchases	
4.9	Capital One Bank	Last 4 digits of account number	7062	\$4,717.00
	Nonpriority Creditor's Name P. O. Box 30281 Sold Lake City, UT 84130	When was the debt incurred?	1/2013-8/2018	
	Salt Lake City, UT 84130 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	•	,	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	Purchases	
4.1				
0	Citicards CBNA	Last 4 digits of account number	4407	\$6,316.00
	Nonpriority Creditor's Name 5800 South Corporate PI. Sioux Falls, SD 57108	When was the debt incurred?	2/2017-12/2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	O continuent		
	Debtor 2 only	☐ Contingent		
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	■ Other. Specify Credit Card	l Purchases	

	or 1 George C. Hebert or 2 Holly L. Hebert	Case number (if known)	
4.1 1	Constar Financial	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name 10400 N. 25th Ave., Ste. 100 Phoenix, AZ 85021	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divor report as priority claims	ce that you did not
	■ No	\square Debts to pension or profit-sharing plans, and other similar	debts
	Yes	■ Other. Specify Collection Account Ally notice onl	
4.1 2	Credit One Bank	Last 4 digits of account number 2379	\$483.00
	Nonpriority Creditor's Name PO Box 98872 Las Vegas, NV 89193	When was the debt incurred? 2/2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divor report as priority claims	ce that you did not
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar	debts
	Yes	■ Other. Specify Credit Card Purchases	
4.1 3	Kaiser Foundation Health Plan	Last 4 digits of account number 2240	\$775.00
	Nonpriority Creditor's Name File 50445 Los Angeles, CA 90074	When was the debt incurred? 12/2109	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divor	ce that you did not
	Is the claim subject to offset?	report as priority claims	oe mat you did not
	■ No	\square Debts to pension or profit-sharing plans, and other similar	debts
	□Yes	■ Other. Specify medical	

Debte Debte	or 1 George C. Hebert Or 2 Holly L. Hebert		Case number (if known)	
4.1 4	Mechanics Bank FKA CRB	Last 4 digits of account number	xxxx	\$3,389.00
	Nonpriority Creditor's Name PO Box 25805	When was the debt incurred?	9/2018	
	Santa Ana, CA 92799 Number Street City State Zip Code	As of the date you file, the claim		
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify	Balance On Repossessed	
4.1 5	Mohela/Dept of ED Nonpriority Creditor's Name	Last 4 digits of account number	<u>1MO0</u>	\$22,399.00
	633 Spirit Drive Chesterfield, MO 63005	When was the debt incurred?	6/2017	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	☐ Other. Specify		
		Student Lo	an	
4.1 6	Portfolio Recovery Associates, Nonpriority Creditor's Name	Last 4 digits of account number	4006	\$655.09
	P.O. Box 12914 Norfolk, VA 23541	When was the debt incurred?	3/2020	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify collection a	account HSBC	

Debtor Debtor	1 George C. Hebert 2 Holly L. Hebert		Case number (if known)	
4.1 7	Syncb/Living Spaces	Last 4 digits of account number	0509	\$558.00
	Nonpriority Creditor's Name PO Box 965036 Orlando, FL 32896	When was the debt incurred?	3/2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	I Purchases	
4.1 8	Synergetic Communication Inc	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name 5450 NW Central #220 Houston, TX 77092	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify collection a	account CRB notice only	
4.1 9	The Home Depot	Last 4 digits of account number	1251	\$743.00
	Nonpriority Creditor's Name 5800 South Corporate PI. Sioux Falls, SD 57108	When was the debt incurred?	5/2019-7/2019	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	•	
	☐ Yes	Other. Specify Credit Card	l Purchases	

Case 20-04403-CL7 Filed 08/31/20 Entered 08/31/20 16:44:33 Doc 1 Pg. 28 of 75

Debtor 1 Debtor 2	George C Holly L. H			Case nu	ımber (if known)	
	JS Bank Ionpriority Cred	ditarla Nama	Last 4 digits of account number	6820		\$1,537.00
F	PO Box 108	3	When was the debt incurred?	3/201	8-1/2020	
N	lumber Street	, MO 63166 City State Zip Code the debt? Check one.	As of the date you file, the claim	is: Check	all that apply	
	Debtor 1 onl	ly	☐ Contingent			
	Debtor 2 onl	ly	☐ Unliquidated			
	Debtor 1 and	d Debtor 2 only	☐ Disputed			
	At least one	of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	Check if thi	s claim is for a community	☐ Student loans			
d	ebt	bject to offset?	Obligations arising out of a separeport as priority claims	aration agr	reement or divorce that you did not	
_	No	•	Debts to pension or profit-sharing	ng plans, a	and other similar debts	
	☐ Yes		■ Other Specify Credit Card			
4.2 1	JSCB Ame	rica	Last 4 digits of account number	2840		\$1,085.59
	lonpriority Cred	ditor's Name	When was the debt incurred?	2/202		
		s, CA 90071 City State Zip Code	As of the date you file, the claim	is: Check	all that apply	
v	Vho incurred t	the debt? Check one.				
	Debtor 1 onl	ly	☐ Contingent			
	Debtor 2 onl	ly	☐ Unliquidated			
	Debtor 1 and	d Debtor 2 only	☐ Disputed			
	At least one	of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	Check if thi	s claim is for a community	☐ Student loans			
d	ebt	bject to offset?	Obligations arising out of a separeport as priority claims	aration agr	reement or divorce that you did not	
_	No	•	Debts to pension or profit-sharing	ng plans, a	and other similar debts	
	☐ Yes		Other. Specify collection	accoun	t Kaiser Permanente	
Part 3:		s to Be Notified About a Debt	That You Already Listed		du listad in Data 4 or 2 For example	o if a collection arrange
is trying have mo	to collect fro ore than one c	m you for a debt you owe to some	eone else, list the original creditor in ou listed in Parts 1 or 2, list the add	Parts 1	or 2, then list the collection agency	here. Similarly, if you
Part 4:	Add the A	mounts for Each Type of Unse	ecured Claim			
	e amounts of unsecured cla		s. This information is for statistical r	eporting	purposes only. 28 U.S.C. §159. Add	the amounts for each
					Total Claim	
Total	6a.	Domestic support obligations		6a.	\$	
claims from Part	1 6b.	Taxes and certain other debts y	ou owe the government	6b.	\$ 7,001.87	
	6c.	Claims for death or personal inj	-	6c.	\$ 0.00	
	6d.	Other. Add all other priority unsec	ured claims. Write that amount here.	6d.	\$ 0.00	
	6e.	Total Priority. Add lines 6a through	gh 6d.	6e.	\$ 7,001.87	
					Total Claim	
Total	6f.	Student loans		6f.	\$ 22,399.00	
claims from Part	2 6g.	Obligations arising out of a sep	aration agreement or divorce that	6g.	\$ 0.00	

Debtor 2 George C. Hebert Case number (if known)

6h. Debts to pension or profit-sharing plans, and other similar debts
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

6j. Total Nonpriority. Add lines 6f through 6i.

Case number (if known)

6h. \$ 0.00

6i. \$ 42,792.18

Fill in this infor	mation to identify your	case:			
Debtor 1	George C. Hebert	:			
	First Name	Middle Name	Last Name		
Debtor 2	Holly L. Hebert				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT 6/2016	OF CALIFORNIA REVISED	PLAN	
Case number					
(if known)					Check if this is an
					amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number,	whom you have the Street, City, State and ZIP	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					
2.2	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.5					·
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	•				

Official Form 106G

Fill in this	information to identify your	case:			
Debtor 1	George C. Hebert				
	First Name	Middle Name	Last Name		
Debtor 2	Holly L. Hebert	Middle Nome	Last Name		
(Spouse if, fili	ng) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	SOUTHERN DISTRICT OF 6/2016	F CALIFORNIA REVI	SED PLAN	
Case num	ber				
(if known)					☐ Check if this is an
					amended filing
Officia	l Form 106H				
		-l-4			
Sched	dule H: Your Cod	eptors			12/15
1. Do No Yes 2. With Arizon No. Yes	thin the last 8 years, have you ha, California, Idaho, Louisiana, Go to line 3. B. Did your spouse, former spou	Answer every question. You are filing a joint case, do lived in a community proponer of the co	not list either spouse erty state or territor o Rico, Texas, Washi	as a codebtor. y? (Community property sta	,
	Yes.				
	In which community state	or territory did you live?	-NONE-	. Fill in the name and c	current address of that person.
in line Form	e 2 again as a codebtor only i	Code ors. Do not include your sp that person is a guarantor	or cosigner. Make	sure you have listed the c	ith you. List the person shown reditor on Schedule D (Official nedule E/F, or Schedule G to fil
out C	Olullili 2.				
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The creditor Check all schedules the	or to whom you owe the debt nat apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
=	Number Street			_	
	City	State	ZIP Code		
				_	
3.2	Nama			Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street	21.1	TID C	_	
	City	State	ZIP Code		

Fill in this information	to identify your case:		
Debtor 1	George C. Hebert		
Debtor 2 (Spouse, if filing)	Holly L. Hebert		
United States Bankru	,	THERN DISTRICT OF CALIFORNIA REVISED 16/2016	
Case number (If known)			Check if this is: An amended filing As supplement showing postpetition chapter
Official Form	<u> 106I</u>		13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe	e Employment			
 Fill in your emplinements 	oyment		Debtor 1	Debtor 2 or non-filing spouse
If you have more		Employment status	☐ Employed	■ Employed
attach a separate page with information about additional	Employment status	■ Not employed	☐ Not employed	
employers.		Occupation	unemployed	Manager
Include part-time, self-employed wo		Employer's name		Industrial Fire Sprinkler
Occupation may i or homemaker, if		Employer's address		3845 Imperial Ave. San Diego, CA 92113
		How long employed the	nere?	11 years

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 0.00 \$ 6,240.00

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

Official Form 106l Schedule I: Your Income page 1

Debt Debt		George C. Heb Holly L. Hebert		_		Cas	se number (<i>if k</i>	nown	o) _			
							or Debtor 1			For Debtor	pouse	
	Сор	y line 4 here		4		\$_	(0.00)	\$6	240.00	
5.	List	all payroll deduc	tions:									
	5a.	Tax, Medicare,	and Social Security deductions	5	a.	\$	(0.00)	\$ 1	073.10	
	5b.	•	tributions for retirement plans	5	b.	\$	(0.00)	\$	0.00	
	5c.		ributions for retirement plans		C.	\$	(0.00)	\$	0.00	
	5d.		ments of retirement fund loans		d.	\$		0.00)	\$	0.00	
	5e.	Insurance		-	e.	\$_		0.00	_	\$	0.00	
	5f.	Domestic supp	ort obligations	-	f.	\$		0.00	_	\$	0.00	
	5g.	Union dues			g.	\$_		0.00	_	\$	0.00	
	5h.	Other deduction	ns. Specify:	_ 5	h.+	\$	(0.00	+		0.00	
6.			ctions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6		\$		0.00			073.10	
7.	Cald	culate total month	Ily take-home pay. Subtract line 6 from line 4.	7		\$		0.00)	\$5	166.90	
8.	List 8a.	Net income from profession, or for Attach a statement	regularly received: m rental property and from operating a business, farm ent for each property and business showing gross y and necessary business expenses, and the total									
		monthly net inco			a.	\$		0.00	_	\$	0.00	
	8b.	Interest and div		_	b.	\$_		0.00)	\$	0.00	
	8c.	regularly receiv										
			spousal support, child support, maintenance, divorce property settlement.	٥	c.	\$,	^ ^		\$	0.00	
	8d.	Unemployment			d.	\$		0.00 7.00	_	\$	0.00	
	8e.	Social Security	•		u. e.	\$		7.00 0.00	_	\$	0.00	
	8f.	Other government of the control of t	ent assistance that you regularly receive sistance and the value (if known) of any non-cash assistance, such as food stamps (benefits under the Supplemental nce Program) or housing subsidies.			\$	ļ	0.00	<u> </u>	\$	0.00	
	8g.	Pension or retir	rement income	8	g.	\$		0.00)	\$	0.00	
	8h.	Other monthly	income. Specify:	8	h.+	\$	(0.00	+	· \$	0.00	
9.	Add	l all other income.	. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9	. [\$_	89	7.00	0	\$	0.00	
4.0	٠.			4.0				1 Г	Φ			
10.		•	come. Add line 7 + line 9. 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$.		897.00	 †	»	5,166.90	= \$	6,063.90
11.	Stat Inclu	te all other regular and contributions from the friends or relative the friends or relative the friends any ame	r contributions to the expenses that you list in Schedule om an unmarried partner, members of your household, your	dep						d in <i>Schedule</i>	e J. +\$	0.00
12.		e that amount on the	e last column of line 10 to the amount in line 11. The residue Summary of Schedules and Statistical Summary of Certa								\$	6,063.90
13.	Do y	you expect an inc No.	rease or decrease within the year after you file this form	?							Combine monthly	
	<u> </u>	Yes. Explain:	Debtor is receiving unemployment benefits of \$2 additional \$600 per week benefit under the CARI per hour at 40 hours per week. She received a to 2020.	ES A	Act	i. Jo	oint debto	r's s	sala	ary going fo	rward is	

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	ation to identify yo	ur case:							
	otor 1	George C. He				Ch	eck if this	e ie:		
							An am	ended filing		
	otor 2 ouse, if filing)	Holly L. Hebe	ert						ving postpetition chapted the following date:	•
``		ruptcy Court for the:		IERN DISTRICT OF CALIF ED PLAN 6/2016	FORNIA		MM / E	DD / YYYY		
	e number nown)									
Ot	fficial Fo	orm 106J								
		J: Your E							12	/1
info	ormation. If member (if known the control of the co	nore space is nee n). Answer ever ribe Your House	eded, atta y questio	If two married people ar ch another sheet to this n.						
1.	Is this a join									
	□ No. Go to	o line 2. es Debtor 2 live i	n a conar	ata housahold?						
	= 1es. D 0e		ii a sepai	ate flousefloid:						
			t file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of De	ebtor 2.			
2.	Do you hav	e dependents?	■ No							
	Do not list D Debtor 2.	•	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		De age	pendent's	Does dependent live with you?	
	Do not state dependents						- - - -		☐ No ☐ Yes	
3.	expenses o	penses include f people other th d your depender	nan $_{\square}$	No Yes					☐ Yes	
Est	imate your ex		ur bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp						
the		h assistance and		government assistance i luded it on <i>Schedule I:</i> Y				Your expe	enses	
4.		or home ownershind any rent for the		ses for your residence. In	nclude first mortgage	÷ 4.	\$		1,700.00	
	If not include	ded in line 4:								
	4a. Real	estate taxes				4a.	\$		0.00	
		erty, homeowner's	, or renter	's insurance		4b.	·		8.00	
		maintenance, re				4c.	:		0.00	
5.		owner's associati		dominium dues our residence , such as ho	me equity loans	4d. 5.			0.00	
J.	Additional	igage payille	into ioi y	on residence, such as 110	ino equity idalis	٥.	Ψ		0.00	

	otor 1 otor 2	George C. Hebert Holly L. Hebert	Case num	ase number (if known)					
6. Utilities:									
	6a.	Electricity, heat, natural gas	6a.	\$	230.00				
	6b.	Water, sewer, garbage collection	6b.	\$	145.00				
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00				
	6d.	Other. Specify: Cell phone	6d.	\$	190.00				
		Cable TV		\$	140.00				
		Trash		\$	35.00				
		Internet/landline		\$	55.00				
7.		and housekeeping supplies	7.	· ·	800.00				
8.		dcare and children's education costs	8.		0.00				
9.		ning, laundry, and dry cleaning	9.	\$	150.00				
		onal care products and services	10.	\$	60.00				
11.		cal and dental expenses	11.	\$	120.00				
12.		sportation. Include gas, maintenance, bus or train fare.	12.	\$	400.00				
13		ot include car payments. rtainment, clubs, recreation, newspapers, magazines, and books	13.	·	150.00				
		itable contributions and religious donations	14.	·	0.00				
		rance.		Ψ	0.00				
10.		ot include insurance deducted from your pay or included in lines 4 or 20.							
		Life insurance	15a.	\$	0.00				
	15b.	Health insurance	15b.	\$	0.00				
	15c.	Vehicle insurance	15c.	\$	122.24				
	15d.	Other insurance. Specify:	15d.	\$	0.00				
16.	Taxe	s. Do not include taxes deducted from your pay or included in lines 4 or 20.							
		ify: IRS Installment payments	16.	\$	200.00				
		ify: FTB Installment payments		\$	150.00				
17.		illment or lease payments:		_					
		Car payments for Vehicle 1	17a.	· -	865.38				
		Car payments for Vehicle 2	17b.	·	157.00				
		Other. Specify:	17c.	· -	0.00				
		Other. Specify:	17d.	\$	0.00				
18.		payments of alimony, maintenance, and support that you did not report as acted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00				
19		r payments you make to support others who do not live with you.		\$	0.00				
10.	Spec		19.	<u> </u>	0.00				
20.		r real property expenses not included in lines 4 or 5 of this form or on Sche		our Income.					
		Mortgages on other property	20a.		0.00				
	20b.	Real estate taxes	20b.	\$	0.00				
	20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00				
	20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00				
	20e.	Homeowner's association or condominium dues	20e.	\$	0.00				
21.	Othe	r: Specify: Miscellaneous	21.	+\$	100.00				
		class		+\$	135.00				
		phol Scram bracelet		+\$	360.00				
		breathalyzer		+\$	88.00				
		2							
22.		ulate your monthly expenses		.	6 000 00				
		Add lines 4 through 21.		\$ *	6,360.62				
		Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		·					
	22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	6,360.62				
23.	Calc	ulate your monthly net income.							
		Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	6,063.90				
		Copy your monthly expenses from line 22c above.	23b.	-\$	6,360.62				
					·				
	23c.	Subtract your monthly expenses from your monthly income.	00-	•	-296.72				
		The result is your monthly net income.	23c.	Ψ	-230.1 Z				

Case 20-04403-CL7 Filed 08/31/20 Entered 08/31/20 16:44:33 Doc 1 Pg. 36 of 75

Debtor 1 Debtor 2		George C. Hebert Holly L. Hebert	Case number (if known)				
For e		you expect an increase or decrease in your expenses within the year after you file this form? example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a lification to the terms of your mortgage?					
	■ No	0.					
	□ Ye	es. Explain here:					

Debtor 1	George C. Hebert			
	First Name	Middle Name	Last Name	
Debtor 2	Holly L. Hebert			
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba Case number	nkruptcy Court for the:	6/2016	OF CALIFORNIA REVISED PLAN	
if known)				☐ Check if this is ar amended filing

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below		
Die	d you pay or agree to pay someone who is N	IOT an attorney to help	o you fill out bankruptcy forms?
	No		
	Yes. Name of person		Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	der penalty of perjury, I declare that I have re t they are true and correct. /s/ George C. Hebert	ead the summary and s	
	George C. Hebert		Holly L. Hebert
	Signature of Debtor 1		Signature of Debtor 2
	Date August 4, 2020		Date August 4, 2020

Official Form 106Dec

Fil	l in this inforn	nation to identify you	r case:			
	btor 1	George C. Hebe				
		First Name	Middle Name	Last Name		
	btor 2	Holly L. Hebert	ACT III AL			
(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT C 6/2016	F CALIFORNIA REVISED F	PLAN	
	se number _				_	heck if this is an mended filing
St Be info	as complete a	of Financial	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for supply additional pages, write you	
Pa	rt 1: Give D	Details About Your Ma	arital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
	■ Married□ Not man	ried				
2.	During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	st all of the places you l	ived in the last 3 years. Do no	ot include where you live now	ı.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	Idress:	Dates Debtor 2 lived there
3. stat					ity property state or territory	
	□ No					
		ake sure vou fill out <i>Scl</i>	hedule H: Your Codebtors (Of	ficial Form 106H).		
			roudio i in i odi. Godobioro (G.			
Pa	rt 2 Explai	in the Sources of You	r Income			
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	III businesses, including part		ndar years?
	□ No					
	_	I in the details.				
			Debtor 1	One and the second	Debtor 2	0
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$48,400.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

Debtor 2		orge C. Ho				Case	e number (if known)		
				Sources of income Check all that apply.		s income e deductions and sions)	Sources of inco		Gross income (before deductions and exclusions)
		dar year: December :	31, 2019)	■ Wages, commissions, bonuses, tips		\$0.00	■ Wages, common bonuses, tips	nissions,	\$57,598.00
				☐ Operating a business			☐ Operating a b	usiness	
		dar year bei December		■ Wages, commissions, bonuses, tips		\$70,640.00	■ Wages, common bonuses, tips	nissions,	\$13,694.00
				☐ Operating a business			☐ Operating a b	usiness	
List □ ■	No	source and t	J	ome from each source separ	ately. Do n	ot include income tl	nat you listed in line	; 4.	
				Debtor 1			Debtor 2		
				Sources of income Describe below.	each	s income from source e deductions and sions)	Sources of inco Describe below.	me	Gross income (before deductions and exclusions)
		1 of currer	nt year until kruptcy:	unemployment		\$10,404.00			
				unemployment		\$2,358.00			
Part 3: 6. Are □		Debtor 1's	or Debtor 2 ebtor 1 nor D	Made Before You Filed for 's debts primarily consumo Debtor 2 has primarily consumants	er debts? sumer deb	ts. Consumer debt	s are defined in 11 l	U.S.C. § 10	1(8) as "incurred by an
		•	•	ore you filed for bankruptcy, o	did you pay	y any creditor a tota	l of \$6,825* or more	∍?	
		□ _{No.} □ _{Yes}		7. each creditor to whom you pa editor. Do not include payme					
		* Subject	not include	payments to an attorney for t on 4/01/22 and every 3 year	this bankr	uptcy case.	•	• •	, ,
	Yes.			or both have primarily consore you filed for bankruptcy, o			of \$600 or more?		
		□ No.	Go to line 7	7.					
		■ Yes	include pay	each creditor to whom you payments for domestic support this bankruptcy case.					
Cre	editor'	s Name and	d Address	Dates of paym	ent	Total amount	Amount you	Was this p	payment for

Den	tor 1 George C. Hebert Holly L. Hebert			e number (if known)	
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	GECRB/KTM Retail Finance PO BOX 965001 Orlando, FL 32896	payments made 90 days prior to filing	\$600.00	\$7,687.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ■ Other Motorcycle
	Internal Revenue Service Centralized Insolvency Oper. PO Box 7346 Philadelphia, PA 19101-7346	payments made 90 days prior to filing	\$675.00	\$4,914.57	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ■ Other taxes
	Chrysler Capital PO Box 961212 Fort Worth, TX 76161	payments made 90 days prior to filing	\$2,596.14	\$47,111.44	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
	Within 1 year before you filed for bankrup Insiders include your relatives; any general p of which you are an officer, director, person is a business you operate as a sole proprietor. alimony.	artners; relatives of any gent control, or owner of 20%	eneral partners; partners or more of their voting	erships of which yo g securities; and a	ou are a general partner; corporation ny managing agent, including one
	Yes. List all payments to an insider.				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Within 1 year before you filed for bankrup	tcy, did you make any pa	yments or transfer a	any property on a	ccount of a debt that benefited a
	Include payments on debts guaranteed or co ■ No □ Yes. List all payments to an insider	signed by an insider.			
	■ No	signed by an insider. Dates of payment	Total amount	Amount you	Reason for this payment
	■ No □ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Part	No Yes. List all payments to an insider Insider's Name and Address 4: Identify Legal Actions, Repossession Within 1 year before you filed for bankrup List all such matters, including personal injury modifications, and contract disputes. No	Dates of payment ons, and Foreclosures tcy, were you a party in a	paid any lawsuit, court ac	still owe	Include creditor's name rative proceeding?
Part	No Yes. List all payments to an insider Insider's Name and Address Identify Legal Actions, Repossession Within 1 year before you filed for bankrup List all such matters, including personal injury modifications, and contract disputes.	Dates of payment ons, and Foreclosures tcy, were you a party in a	paid any lawsuit, court ac	still owe	Include creditor's name rative proceeding?

	btor 1 George C. Hebert Holly L. Hebert		Case number (if known)	
10.	Within 1 year before you filed for bankru Check all that apply and fill in the details be	uptcy, was any of your property repossess elow.	ed, foreclosed, garnished, attached	d, seized, or levied?
	□ No. Go to line 11.			
	Yes. Fill in the information below.			
		Describe the Premarty	Data	Value of the
	Creditor Name and Address	Describe the Property	Date	Value of the property
		Explain what happened		
	Mechanics Bank FKA CRB PO Box 25805	2011 Jeep Wranlger	1/2020	\$0.00
	Santa Ana, CA 92799	■ Property was repossessed.		
		☐ Property was foreclosed.		
		☐ Property was garnished.		
		☐ Property was attached, seized or lev	ied.	
	Ally Financial P.O. Box 380901	2015 Ford Explorer	11/2019	\$22,600.00
	Minneapolis, MN 55438-0902	Property was repossessed.		
		☐ Property was foreclosed.		
		☐ Property was garnished.		
		☐ Property was attached, seized or lev	ied.	
	■ No □ Yes. Fill in the details.		5	
	Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, o	uptcy, was any of your property in the pose or another official?	session of an assignee for the bend	efit of creditors, a
	■ No			
	☐ Yes			
Par	tt 5: List Certain Gifts and Contribution	ns		
13.	■ No	ruptcy, did you give any gifts with a total v	value of more than \$600 per person	?
	☐ Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$60 per person	00 Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:	I		
14.	Within 2 years before you filed for bankr	ruptcy, did you give any gifts or contributi	ons with a total value of more than	\$600 to any charity?
	■ No			, , , , , ,
	Yes. Fill in the details for each gift or o	contribution.		
	Gifts or contributions to charities that		Dates you	Value
	more than \$600 Charity's Name	Describe what you contributed	contributed	value
	Address (Number, Street, City, State and ZIP Code	le)		

	otor 1 George C. Hebert Holly L. Hebert		C	Case number	(if known)	
Par	t 6: List Certain Losses					
	Within 1 year before you filed for bankrup or gambling?	tcy or	since you filed for bankruptcy, did y	ou lose anyt	hing because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.					
	how the loss occurred	Include	the amount that insurance has paid. Loc claims on line 33 of Schedule A/B:	ist pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers					
16.	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petition pr No Yes. Fill in the details.	reparin	g a bankruptcy petition?			rty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	ou	Description and value of any proper transferred	erty	Date payment or transfer was made	Amount of payment
	Bankruptcy Law Center 1230 Columbia St., Suite 1100 San Diego, CA 92101 bankruptcyattorneys.org		Attorney Fees		1/24/2020	\$1,800.00
17.	Within 1 year before you filed for bankrup promised to help you deal with your credi Do not include any payment or transfer that y	itors or	to make payments to your creditors		r transfer any prope	rty to anyone who
	■ No					
	☐ Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment
 18. Within 2 years before you filed for bankruptor transferred in the ordinary course of your but include both outright transfers and transfers mad include gifts and transfers that you have already No Yes. Fill in the details. 		busine made a	ess or financial affairs? as security (such as the granting of a se			
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made
	Person's relationship to you			•		
19.	Within 10 years before you filed for bankr beneficiary? (These are often called asset-µ ■ No □ Yes. Fill in the details.			elf-settled tru	ust or similar device	of which you are a
	Name of trust		Description and value of the prope	erty transferr	ed	Date Transfer was made

	otor 1 George C. Hebert Holly L. Hebert			Case nun	nber (if known)	
Part	t 8: List of Certain Financial Accounts, In	nstruments, Safe Depos	sit Boxes, and St	orage Uni	ts	
	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso No Yes. Fill in the details.	or other financial accor	unts; certificates	s of deposi	•	•
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Wells Fargo	XXXX-	■ Checking □ Savings □ Money Mai □ Brokerage □ Other	rket	10/2019	\$0.00
	Do you now have, or did you have within 1 cash, or other valuables? No Yes. Fill in the details.	year before you filed fo	or bankruptcy, a	ny safe de	posit box or other depo	esitory for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit ■ No □ Yes. Fill in the details.	or place other than you	ur home within 1	year befo	re you filed for bankrup	otcy?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
Parí	t 9: Identify Property You Hold or Control	,				
	Do you hold or control any property that s for someone.	omeone else owns? Inc	lude any proper	ty you bor	rowed from, are storinç	g for, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Value
Part	t 10: Give Details About Environmental In	formation				
For t	the purpose of Part 10, the following definit	tions apply:				
	Environmental law means any federal, stat toxic substances, wastes, or material into regulations controlling the cleanup of thes	the air, land, soil, surfa	ce water, ground	• .	•	

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Deb	tor 2	Holly L. Hebert		Case no	umber (if	known)			
24.	Has	any governmental unit notified you that	you may be liable or potentially liable	under o	or in viol	ation of an environme	ntal law?		
		No Yes. Fill in the details.							
	_	res. Fill in the details.	Covernmental unit	En	ironmo	atal law if you	Date of notice		
		Iress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		ow it	ntal law, if you	Date of Hotice		
25.	Have	e you notified any governmental unit of	any release of hazardous material?						
		No Yes. Fill in the details.							
	_	ne of site	Covernmental unit	Env	ironmo	atal law if you	Date of notice		
		iress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		ow it	ntal law, if you	Date of notice		
26.	Have	e you been a party in any judicial or adm	ninistrative proceeding under any envir	ronment	tal law?	Include settlements a	nd orders.		
		No Yes. Fill in the details.							
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature	of the c	ase	Status of the case		
Par	11:	Give Details About Your Business or (Connections to Any Business						
		_	•	y of the	followin	ng connections to any	business?		
	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
		☐ A member of a limited liability comp							
		☐ A partner in a partnership							
		☐ An officer, director, or managing exe	ecutive of a corporation						
		☐ An owner of at least 5% of the voting	g or equity securities of a corporation						
		No. None of the above applies. Go to P	art 12.						
		Yes. Check all that apply above and fill	in the details below for each business.						
		siness Name Iress	Describe the nature of the business		Employer Identification number Do not include Social Security number or ITIN.				
		nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper			•	idiliber of friid.		
	Geo	orge C. Hebert	truck driver	Ell		iness existed 4242			
	953	7 Rawlins Way	sole proprietorship	Fr	om-To	10/1998-9/2019			
	Sar	ntee, CA 92071	n/a			10/1990-9/2019			
		lly L. Hebert 7 Rawlins Way	real estate sales sole proprietorship	EII	N:	7173			
		ntee, CA 92071	n/a	Fr	From-To 9/2001-present				
28.		in 2 years before you filed for bankrupto tutions, creditors, or other parties.	cy, did you give a financial statement to	o anyon	ne about	your business? Inclu	de all financial		
		No Yes. Fill in the details below.							
		ne Iress	Date Issued						
	(Num	nber, Street, City, State and ZIP Code)							

Debtor 1 George C. Hebert

Case 20-04403-CL7 Filed 08/31/20 Entered 08/31/20 16:44:33 Doc 1 Pg. 45 of 75

Debtor 1	George C. Hebert		
Debtor 2	Holly L. Hebert		Case number (if known)
Part 12:	Sign Below		
I have read	the answers on this Statement of	Financial Affairs ar	nd any attachments, and I declare under penalty of perjury that the answers
are true an	nd correct. I understand that makin	g a false statement	, concealing property, or obtaining money or property by fraud in connection
with a ban	kruptcy case can result in fines up	to \$250,000, or imp	prisonment for up to 20 years, or both.
18 U.S.C. §	§§ 152, 1341, 1519, and 3571.		
/s/ Georg	ge C. Hebert	/s/ Ho	olly L. Hebert
George (C. Hebert	Holly	L. Hebert
Signature	of Debtor 1	Signat	ture of Debtor 2
Date Au	ugust 4, 2020	Date	August 4, 2020
Did you att	tach additional pages to Your State	ement of Financial	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did you pa	y or agree to pay someone who is	not an attorney to I	help you fill out bankruptcy forms?
■ No			
☐ Yes. Na	me of Person Attach the Bar	nkruptcy Petition Prep	parer's Notice, Declaration, and Signature (Official Form 119).

Fill in this infor	mation to identify your	case:		
Debtor 1	George C. Hebert	t		
	First Name	Middle Name	Last Name	
Debtor 2	Holly L. Hebert			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT 6/2016	OF CALIFORNIA REVISED PLAN	
Case number _ (if known)				☐ Check if this is an amended filing

Official Form 108

name:

property

name:

securing debt:

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the property secures a debt? as exempt on Schedule C? Creditor's **Chrysler Capital** ☐ Surrender the property. ■ No

☐ Retain the property and redeem it. ☐ Retain the property and enter into a 2019 Ram 1500 Classic 12000 Description of Reaffirmation Agreement. property miles **SLT Crew Cab SWB 2WD** securing debt:

Retain the property and [explain]: retain and pay

Creditor's Freedom Road Financial ☐ Surrender the property. name: ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Description of 2018 Husqvarna FX 350 20000 Reaffirmation Agreement.

Retain the property and [explain]: Retain & pay

Creditor's **GECRB/KTM Retail Finance**

miles

☐ Surrender the property. ☐ Retain the property and redeem it.

Description of 2019 Husqvarna FE450 15000 property miles

☐ Retain the property and enter into a ☐ Yes Reaffirmation Agreement.

☐ Yes

☐ No

Yes

■ No

Statement of Intention for Individuals Filing Under Chapter 7 Official Form 108

page 1

Debtor 1 Debtor 2	George C. Hebert	Caca number (# land	a.ush
Jebioi Z	Holly L. Hebert	Case number (if kno	
securin	ng debt:	Retain the property and [explain]: Retain & pay	
Oort O	List Vous Unavaired Personal Prope	rty Logge	
the info	ormation below. Do not list real estate	t you listed in Schedule G: Executory Contracts and Unexpeleases. Unexpired leases are leases that are still in effect orty lease if the trustee does not assume it. 11 U.S.C. § 365	the lease period has not yet ended.
Describe	your unexpired personal property lea	ases	Will the lease be assumed?
_essor's r			□ No
Description Property:	on of leased		☐ Yes
_essor's r	name:		□ No
Description Property:	on of leased		☐ Yes
_essor's r	name:		□ No
Description Property:	on of leased		☐ Yes
_essor's r	name:		□ No
Description Property:	on of leased		☐ Yes
.essor's r	name:		□ No
Description Property:	on of leased		☐ Yes
.essor's r	name:		□ No
Description Property:	on of leased		☐ Yes
.essor's r	name:		□ No
Description Property:	on of leased		☐ Yes
Part 3:	Sign Below		
	nalty of perjury, I declare that I have in that is subject to an unexpired lease.	ndicated my intention about any property of my estate that	secures a debt and any personal
(<u>/s/</u> (George C. Hebert	X /s/ Holly L. Hebert	
	orge C. Hebert lature of Debtor 1	Holly L. Hebert Signature of Debtor 2	
Date	e August 4. 2020	Date August 4, 2020	

Fill in this info	rmation to identify your case:			eck one box 2A-1Supp:	only as c	irected	in this form and	in Form
Debtor 1	George C. Hebert			za-Toupp:				
Debtor 2	Holly L. Hebert			☐ 1. There i	s no pres	umptio	n of abuse	
(Spouse, if filing)				■ 2. Tho co	loulation t	o dotor	mine if a presur	mption of abuse
United States	Bankruptcy Court for the: Southern District of plan 6/2016	of California revi	sed	applie	s will be r	nade ui	mine ii a presur nder <i>Chapter 7 i</i> irm 122A-2).	
Case number							not apply now be e but it could ap	
				☐ Check if	this is a	n ame	nded filing	
Official F	Form 122A - 1							
Chapter	7 Statement of Your Cur	rent Moi	nthly Inc	ome				04/20
attach a separat case number (if qualifying milita Part 1: Ca	and accurate as possible. If two married people are sheet to this form. Include the line number to we known). If you believe that you are exempted from a service, complete and file Statement of Exemple alculate Your Current Monthly Income	rhich the addition m a presumption otion from Presur	nal information a of abuse becau	applies. On th ise you do no	e top of a t have pri	ny addit narily c	tional pages, writ onsumer debts o	te your name and or because of
☐ Not m	narried. Fill out Column A, lines 2-11.							
■ Marri	ed and your spouse is filing with you. Fill ou	it both Columns	A and B, lines	2-11.				
☐ Marri	ed and your spouse is NOT filing with you.	You and your s	spouse are:					
☐ Liv	ing in the same household and are not lega	Ily separated.	Fill out both Co	lumns A and	B, lines	2-11.		
pe	ing separately or are legally separated. Fill on malty of perjury that you and your spouse are long apart for reasons that do not include evadir	egally separated	d under nonbar	nkruptcy law	that appli	es or th		
101(10A). Fo the 6 months	erage monthly income that you received from all r example, if you are filing on September 15, the 6-m , add the income for all 6 months and divide the total the same rental property, put the income from that p	onth period would by 6. Fill in the re	be March 1 thro sult. Do not inclu	ugh August 31 de any income	. If the ame amount m	ount of yore than	our monthly incom once. For examp	ne varied during ble, if both
				Column A Debtor 1		Debt	mn B or 2 or filing spouse	
	ess wages, salary, tips, bonuses, overtime, eductions).	and commission	ons (before all	\$	0.00	\$	6,592.00	
	and maintenance payments. Do not include 3 is filled in.	payments from	a spouse if	\$	0.00	\$	0.00	
of you or from an u and room	Ints from any source which are regularly par ryour dependents, including child support. Inmarried partner, members of your household Inmates. Include regular contributions from a sp Do not include payments you listed on line 3.	Include regular I, your depende	r contributions ints, parents,	\$	0.00	\$	0.00	
	me from operating a business, profession,	or farm						
			otor 1					
	ceipts (before all deductions)	\$ 0.00						
•	and necessary operating expenses	-\$ 0.00	Comus home	Φ.	0.00	œ.	0.00	
	hly income from a business, profession, or fare	m \$	Copy here ->	. ф	0.00	\$	0.00	
6. Net inco	me from rental and other real property	Deh	otor 1					
Gross ro	ceipts (before all deductions)	\$ 0.00						
	and necessary operating expenses	-\$ 0.00						
•	hly income from rental or other real property	·	Copy here ->	\$	0.00	\$	0.00	
	dividends, and royalties	*		\$	0.00	\$	0.00	
,						_		

Official Form 122A-1

Holly L. Hebert Debtor 2 Case number (if known) Column A Column B Debtor 2 or Debtor 1 non-filing spouse 8. Unemployment compensation 434.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you 0.00 For your spouse 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.. 0.00 0.00 \$ 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 434.00 6,592.00 \$ 7,026.00 \$ each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: Copy line 11 here=> 12a. Copy your total current monthly income from line 11 7.026.00 Multiply by 12 (the number of months in a year) **x** 12 84.312.00 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. CA Fill in the number of people in your household. Fill in the median family income for your state and size of household. 79.271.00 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? 14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Do NOT fill out or file Official Form 122A-2. 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ George C. Hebert X /s/ Holly L. Hebert Official Form 122A-1 Chapter 7 Statement of Your Current Monthly Income page 2

George C. Hebert

Debtor 1

Case 20-04403-CL7 Filed 08/31/20 Entered 08/31/20 16:44:33 Doc 1 Pg. 50 of 75

Debtor 1 Debtor 2	George C. Hebert Holly L. Hebert		Case number (if known)	
	George C. Hebert Signature of Debtor 1		Holly L. Hebert Signature of Debtor 2	
Dat	August 4, 2020 MM / DD / YYYY	Date	August 4, 2020 MM / DD / YYYY	
	If you checked line 14a, do NOT fill out or file Form 122A-2.			
	If you checked line 14b, fill out Form 122A-2 and file it with this for	orm.		

Official Form 122A-1

Fill in this info	rmation to identify you	r case:
Debtor 1	George C. Hebert	
Debtor 2 (Spouse, if filing	Holly L. Hebert	
United States B	ankruptcy Court for the:	Southern District of California revised plan 6/2016
Case number (if known)		

Check the appropriate box as directed in lines 40 or 42:
According to the calculations required by this Statement:
■ 1. There is no presumption of abuse.
☐ 2. There is a presumption of abuse.

☐ Check if this is an amended filing

Official Form 122A - 2

Chapter 7 Means Test Calculation

04/19

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Pai	rt 1: Determine Your Adjusted Income					
1.	Copy your total current monthly income.	Copy line 11 from Of	ficial Form 122A	-1 here=>	\$	7,026.00
2.	Did you fill out Column B in Part 1 of Form 122A-1? ☐ No. Fill in \$0 for the total on line 3. ☐ Yes. Is your spouse Filing with you? ☐ No. Go to line 3. ☐ Yes. Fill in \$0 for the total on line 3.					
3.	Adjust your current monthly income by subtracting any household expenses of you or your dependents. Follow to On line 11, Column B of Form 122A–1, was any amount of the expenses of you or your dependents? No. Fill in 0 for the total on line 3. Yes. Fill in the information below:	these steps:			d for the hou	ısehold
	State each purpose for which the income was use For example, the income is used to pay your spouse's support other than you or your dependents. Total.	s tax debt or to s tax debt or to s _ s _ s _ s _	Il in the amount e subtracting frour spouse's inc	om		
4.	Adjust your current monthly income. Subtract line 3 from	ı line 1.		Copy total here=		7,026.00

Official Form 122A-2

Debtor 1 Debtor 2	George C. Hebert Holly L. Hebert		Case number (if known)		
Part 2:	Calculate Your Deductions from Your Income				
to an	Internal Revenue Service (IRS) issues National and Laswer the questions in lines 6-15. To find the IRS stauctions for this form. This information may also be a	ndards, go online	using the link specified in	s. Use these amounts the separate	
your	act the expense amounts set out in lines 6-15 regardless actual expenses if they are higher than the standards. Done in line 3 and do not deduct any operating expenses the	o not deduct any ar	mounts that you subtracted fr	o your spouse's	
If you	ur expenses differ from month to month, enter the average	ge expense.			
Wher	never this part of the from refers to you, it means both yo	ou and your spouse	if Column B of Form 122A-1	is filled in.	
5.	The number of people used in determining your ded	uctions from inco	me		
	Fill in the number of people who could be claimed as ex plus the number of any additional dependents whom you the number of people in your household.			2	
Natio	onal Standards You must use the IRS National	I Standards to ansv	ver the questions in lines 6-7		
	Food, clothing, and other items: Using the number of Standards, fill in the dollar amount for food, clothing, and		l in line 5 and the IRS Nation	al \$	1,298.00
	Out-of-pocket health care allowance: Using the number the dollar amount for out-of-pocket health care. The number people who are 65 or olderbecause older people have higher than this IRS amount, you may deduct the addition	nber of people is sp a higher IRS allowa	lit into two categoriespeople ance for health care costs. If	e who are under 65 and	
Peop	ole who are under 65 years of age				
	7a. Out-of-pocket health care allowance per person	\$56.00	-		
	7b. Number of people who are under 65	X2			
	7c. Subtotal. Multiply line 7a by line 7b.	\$ 112.00	Copy here=> \$	112.00	
Peop	ole who are 65 years of age or older				
	7d. Out-of-pocket health care allowance per person	\$ 125.00	-		
	7e. Number of people who are 65 or older	X0			
	7f. Subtotal. Multiply line 7d by line 7e.	\$	Copy here=> +\$	0.00	
	7g. T otal. Add line 7c and line 7f		\$112.00	Copy total here=>	112.00

George C. Hebert Debtor 1 Holly L. Hebert Debtor 2 Case number (if known) Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 8. 611.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 2.173.00 listed for your county for mortgage or rent expenses..... 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of the creditor Average monthly payment -NONE-\$ Repeat this Сору amount on 0.00 Total average monthly payment 0.00 here=> 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 2.173.00 2,173.00 or rent expense). If this amount is less than \$0, enter \$0. here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. □ 0. Go to line 14. ☐ 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 460.00

operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

Debtor 1 Debtor 2		eorge C. Hebert olly L. Hebert			Case	number	(if known)		
13.	You	icle ownership or lease expense: Using the IRS Local s may not claim the expense if you do not make any loan of than two vehicles.							
Vel	hicle	1 Describe Vehicle 1: 2019 Ram 1500 Classic	12000 mi	les SLT Cı	rew (Cab S	SWB 2WD		
13a.	. Own	ership or leasing costs using IRS Local Standard				\$	521.00		
13b.	. Aver	rage monthly payment for all debts secured by Vehicle 1.							
	Do n	ot include costs for leased vehicles.							
	are o	alculate the average monthly payment here and on line 1 contractually due to each secured creditor in the 60 month cruptcy. Then divide by 60.			at				
		Name of each creditor for Vehicle 1	Average i	nonthly					
		Chrysler Capital	\$	793.27					
		Total Average Monthly Payment	\$	793.27	Cop	oy e =>	-\$79	Repeat this amount on line 33b.	
13c.		Vehicle 1 ownership or lease expense tract line 13b from line 13a. if this amount is less than \$0,	enter \$0.			\$	0.00	Copy net Vehicle 1 expense here => \$	0.00
Vel	hicle	Describe Vehicle 2: 2019 Husqvarna FE450	15000 mi	es					
13d.	. Own	ership or leasing costs using IRS Local Standard				\$	521.00		
13e.		rage monthly payment for all debts secured by Vehicle 2. ed vehicles.	Do not incl	ude costs fo	r				
		Name of each creditor for Vehicle 2	Average i	nonthly					
	-	GECRB/KTM Retail Finance	\$	129.72					
		Total Average Monthly Payment	\$	129.72	Cop here		129.	Repeat this amount on line 33c.	
13f.	Net '	Vehicle 2 ownership or lease expense						Copy net Vehicle 2	
	Subt	tract line 13e from line 13d. if this amount is less than \$0,	enter \$0			\$	391.28	expense here => \$	391.28
14.		lic transportation expense: If you claimed 0 vehicles in sportation expense allowance regardless of whether you				Stand	ards, fill in the	e Public \$	0.00
15.	also	itional public transportation expense: If you claimed 1 deduct a public transportation expense, you may fill in what more than the IRS Local Standard for <i>Public Transportation</i>	hat you beli						0.00

Debtor 1 Debtor 2 Hebert Case number (if known)

Oth	er Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for	
16.	Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, sales, or use taxes.	\$_	1,127.23
17.	Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.		
	Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$_	0.00
18.	Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	\$_	100.81
19.	Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.		
	Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.	\$_	0.00
20.	Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or		
	for your physically or mentally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education.	\$_	0.00
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.		
	Payments for health insurance or health savings accounts should be listed only in line 25.	\$_	0.00
23.	Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.		
	Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$_	60.00
24.	Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.	\$	6,333.32

Debtor 1 Debtor 2 Hebert Case number (if known)

Add	itional I	Expense Deductions	These are additional de	eduction	ns allowed by th	e Means Test.		
			Note: Do not include ar	ny expe	nse allowances	listed in lines 6-24.		
25.	insuran					ses. The monthly expenses for health y necessary for yourself, your spouse, o	or	
	Health	insurance		\$	0.00			
	Disabili	ity insurance		\$	0.00			
	Health	savings account		+ \$	0.00			
	Total			\$	0.00	Copy total here=>	\$	0.00
	_							
	Do you	actually spend this total a	amount?					
		No. How much do you ad	ctually spend?	_				
		Yes		\$				
26.	continu	e to pay for the reasonab	le and necessary care a ur immediate family who	ınd sup _l o is una	port of an elderl ble to pay for su	actual monthly expenses that you will y, chronically ill, or disabled member of ich expenses. These expenses may 9A(b).	\$	0.00
27.	Protec	tion against family viole	nce. The reasonably ne	cessary	y monthly exper	nses that you incur to maintain the se Act or other federal laws that apply.		
	By law,	, the court must keep the i	nature of these expense	s confic	dential.		\$	0.00
28.		•	•			insurance and operating expenses on		
		pelieve that you have hom fill in the excess amount		more th	an the home er	nergy costs included in expenses on line	•	
		ust give your case trustee t claimed is reasonable ar		actual e	expenses, and y	ou must show that the additional	\$	0.00
29.	\$170.8		for your dependent child			e monthly expenses (not more than han 18 years old to attend a private or		
		ust give your case trustee d is reasonable and neces				ou must explain why the amount 3.		
	* Subje	ect to adjustment on 4/01/2	22, and every 3 years af	ter that	for cases begui	n on or after the date of adjustment.	\$	0.00
30.	higher		nd clothing allowances i	in the IF	RS National Star	ctual food and clothing expenses are ndards. That amount cannot be more		
		a chart showing the maxi		-	-	link specified in the separate rk's office.		
	You mu	ust show that the additiona	al amount claimed is rea	sonabl	e and necessar	y.	\$	44.00
31.		uing charitable contributents to a religious or char				ntribute in the form of cash or financial	+\$	0.00
32.		I of the additional expenes 25 through 31.	se deductions.				\$	44.00

Debtor 1 Debtor 2	George C. Hebert Holly L. Hebert	Case number (if known)	

Dedu	ctions for Debt Payment					
33. Fo	or debts that are secured by an intere ans, and other secured debt, fill in lir	st in property that you own, including holes 33a through 33e.	ne mor	tgages, vehicle		
To cr	o calculate the total average monthly pa editor in the 60 months after you file for	yment, add all amounts that are contractually bankruptcy. Then divide by 60.	due to	each secured		
	Mortgages on your home:					verage monthly syment
33a.	Copy line 9b here			=	:> \$	0.00
	Loans on your first two vehicles:					
33b.	Copy line 13b here			=	:> \$	793.27
33c.					:> \$	129.72
33d.	List other secured debts:					
Name	of each creditor for other secured debt	Identify property that secures the debt		Does payment include taxes of insurance?		
				■ No		
	Freedom Road Financial	2018 Husqvarna FX 350 20000 m	iles	□ Yes	\$	47.10
-					Ψ	
				□ No	_	
-				□ Yes	\$	
				□ No		
				☐ Yes	+\$	
-					7	
					Copy	
33e.	Total average monthly payment. Add li	nes 33a through 33d	\$_	970.09	here=>	\$ 970.09
		secured by your primary residence, a veluport or the support of your dependents			_	
	No. Go to line 35.					
		t pay to a creditor, in addition to the payment sion of your property (called the cure amount information below.				
Name	e of the creditor	Identify property that secures the debt		Total cure amount		Monthly cure amount
-NO	NE-			\$:	- 60 = \$	
					٦	
		To	otal \$_	0.00	Copy total here=>	\$0.00_
	o you owe any priority claims such ase e past due as of the filing date of you	s a priority tax, child support, or alimony or bankruptcy case? 11 U.S.C. § 507.	that		_	
	No. Go to line 36.					
-	Yes. Fill in the total amount of all of t ongoing priority claims, such as	hese priority claims. Do not include current on the three th	r			
	Total amount of all past-due p	riority claims	\$_	7,001.87	÷ 60 =	\$116.70

Debtor 1 Debtor 2		rge C. Hebert / L. Hebert		Cas	se nur	mber (<i>if known</i>)		
For	more	eligible to file a case under Chapter 13? 11 U.S.C. § information, go online using the link for Bankruptcy Bans for this form. Bankruptcy Basics may also be available.	s <i>ics</i> specific			ffice.		
	No.	Go to line 37.						
	Yes.	Fill in the following information.						
		Projected monthly plan payment if you were filing under	er Chapter	13	\$	1,174.70		
		Current multiplier for your district as stated on the list in Administrative Office of the United States Courts (for cand North Carolina) or by the Executive Office for Unit (for all other districts).	districts in A	labama	x _	10.10	7	
		To find a list of district multipliers that includes your distinct the link specified in the separate instructions for this for be available at the bankruptcy clerk's office.				440.64	Copy total	440.04
		Average monthly administrative expense if you were fi	ling under (Chapter 13		118.64	here=> \$ _	118.64
		of the deductions for debt payment. s 33e through 36.					\$_	1,205.43
Total D	educ	tions from Income						
38. Ad	d all o	f the allowed deductions.						
		e 24, All of the expenses allowed under IRS e allowances	\$	6,333.3	2			
	•	e 32, All of the additional expense deductions	\$	44.00	0			
		e 37, All of the deductions for debt payment	+\$	1,205.4	3	ı		
		Total deductions	\$	7,582.7	5	Copy total here	=> \$ _	7,582.75
art 3:	Det	ermine Whether There is a Presumption of Abuse				•		
39. Cal	culate	e monthly disposable income for 60 months						
39	a. Co	py line 4, adjusted current monthly income	\$	7,026.0	0			
39	b. Co	py line 38, <i>Total deductions</i>	-\$	7,582.7	5			
39	e. Mo	inthly disposable income. 11 U.S.C. § 707(b)(2).			5	Copy here=>\$	-556.75	_
	Su	btract line 39b from line 39a	\$	-556.7	_			
Fo						x 6	0	
	or the	btract line 39b from line 39a	300				,	-33,405.00
39	or the	next 60 months (5 years)	390	d. \$		x 6	,	-33,405.00
39 40. Fin	or the lead of the	next 60 months (5 years) tal. Multiply line 39c by 60	390 box that a	d. \$pplies:	-33,	X 6	\$	
39 40. Fin ■	or the look out	tal. Multiply line 39c by 60 whether there is a presumption of abuse. Check the	390 e box that a	d. \$pplies:	-33,	x 6 A05.00 Copy heres	\$	o Part 5.
39 40. Fin ■	or the load. To dout The li Part 4	tal. Multiply line 39c by 60 whether there is a presumption of abuse. Check the line 39d is less than \$8,175*. On the top of page 1 of the line 39d is more than \$13,650*. On the top of page 1 of the line 39d is more than \$13,650*.	390 box that a his form, ch	pplies: neck box 1, <i>Th</i> check box 2,	-33,	x 6 A05.00 Copy heres	\$	o Part 5.

Debtor 1

ebtor 1 ebtor 2		rge C. Hebert y L. Hebert	Case	e number (<i>if</i>	known)		
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If A Summary of Your Assets and Liabilities and Certain Statistical Schedules (Official Form 106Sum), you may refer to line 3b on the	Information	\$.25	7	
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707 Multiply line 41a by 0.25	. , . , . , . , . ,	\$		Copy here=>	\$
25	% of y	ne whether the income you have left over after subtracting all your unsecured, nonpriority debt. ne box that applies:		ctions is	enough to pa	⊒ ay	
		39d is less than line 41b. On the top of page 1 of this form, checl part 5.	k box 1, There	is no pres	sumption of al	buse.	
		39d is equal to or more than line 41b. On the top of page 1 of th umption of abuse. You may fill out Part 4 if you claim special circun					
Part 4:	Giv	ve Details About Special Circumstances					
reas	onable lo. Go 'es. Fil ite You	ve any special circumstances that justify additional expenses e alternative? 11 U.S.C. § 707(b)(2)(B). to to Part 5. Il in the following information. All figures should reflect your average m. You may include expenses you listed in line 25. The property of the special circumstances the decessary and reasonable. You must also give your case trustee documents.	e monthly expe	nse or inc	come adjustm r income adju	ent for ea	ach
	G	Give a detailed explanation of the special circumstances			onthly expensed	se	
			\$				
			 \$				
	_						
	_		Φ				
Part 5:	_	gn Below					
	By si	gning here, I declare under penalty of perjury that the information of	n this stateme	nt and in	any attachme	nts is true	and correct.
			/s/ Holly L. H				
	G(Holly L. Heb Signature of De				
Da	ite Ai	ugust 4, 2020 Date	August 4, 20 MM / DD / YY	20			

Debtor 1 Debtor 2 Holly L. Hebert Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 02/01/2020 to 07/31/2020.

Line 8 - Unemployment compensation (included in CMI)

Source of Income: **EDD** Income by Month:

6 Months Ago:	02/2020	\$0.00
5 Months Ago:	03/2020	\$0.00
4 Months Ago:	04/2020	\$186.00
3 Months Ago:	05/2020	\$558.00
2 Months Ago:	06/2020	\$1,116.00
Last Month:	07/2020	\$744.00
	Average per month:	\$434.00

Non-CMI - Excluded Other Income

Source of Income: **EDD-Cares Act**

Income b	y Month:
----------	----------

6 Months Ago:	02/2020	\$0.00
5 Months Ago:	03/2020	\$0.00
4 Months Ago:	04/2020	\$0.00
3 Months Ago:	05/2020	\$1,800.00
2 Months Ago:	06/2020	\$3,600.00
Last Month:	07/2020	\$2,400.00
	Average per month:	\$1,300.00

Debtor 1	George C. Hebert		
Debtor 2	Holly L. Hebert	Case number (if known)	

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period **02/01/2020** to **07/31/2020**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Industrial Fire

Income by Month:

6 Months Ago:	02/2020	\$5,760.00
5 Months Ago:	03/2020	\$4,032.00
4 Months Ago:	04/2020	\$5,760.00
3 Months Ago:	05/2020	\$9,120.00
2 Months Ago:	06/2020	\$7,680.00
Last Month:	07/2020	\$7,200.00
	Average per month:	\$6,592.00

Revised: 1/24/13

Name, Address, Telephone No. & I.D. No.

Ahren A. Tiller 250608 1230 Columbia St., Suite 1100 San Diego, CA 92101 619-894-8831 250608 CA

UNITED STATES BANKRUPTCY COURT

SOUTHERN DISTRICT OF CALIFORNIA 325 West "F" Street, San Diego, California 92101-6991

In Re George C.

George C. Hebert Holly L. Hebert

Tax I.D. / S.S. #: xxx-xx-4242/xxx-xx-7173

Debtor.

BANKRUPTCY NO.

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF CALIFORNIA REVISED PLAN 6/2016 RIGHTS AND RESPONSIBILITIES OF CHAPTER 7 DEBTORS AND THEIR ATTORNEY

In order for debtors and their attorneys to understand their rights and responsibilities in the bankruptcy process, the following terms of engagement are hereby agreed to by the parties.

Nothing in this agreement should be construed to excuse an attorney from any ethical duties or responsibilities under Federal Rule of Bankruptcy Procedure 9011 and the Local Bankruptcy Rules.

I. Services Included in the Initial Fee Charged

The following are services that an attorney must provide as part of the initial fee charged for representation in a Chapter 7 case:

- 1. Meet with the debtor to review the debtor's assets, liabilities, income and expenses.
- 2. Analyze the debtor's financial situation, and render advice to the debtor in determining whether to file a petition in bankruptcy.
- 3. Describe the purpose, benefits, and costs of the Chapters the debtor may file, counsel the debtor regarding the advisability of filing either a Chapter 7, 11, or 13 case, and answer the debtor's questions.
- 4. Advise the debtor of the requirement to attend the Section 341(a) Meeting of Creditors, and instruct the debtor as to the date, time and place of the meeting.
- 5. Advise the debtor of the necessity of maintaining liability, collision and comprehensive insurance on vehicles securing loans or leases.

- 6. Timely prepare, file and serve, as required, the debtor's petition, schedules, Statement of Financial Affairs, and any necessary amendments to Schedule C.
- 7. Provide documents pursuant to the Trustee Guidelines and any other information requested by the Chapter 7 Trustee or the Office of the United State Trustee.
- 8. Provide an executed copy of the Rights and Responsibilities of Chapter 7 Debtors and their Attorneys to the debtor.
- 9. Appear and represent the debtor at the Section 341(a) Meeting of Creditors, and any continued meeting, except as further set out in Section II.
- 10. File the Certificate of Debtor Education if completed by the debtor and provided to the attorney before the case is closed.
- 11. Attorney shall have a continuing obligation to assist the debtor by returning telephone calls, answering questions and reviewing and sending correspondence.
- 12. Respond to and defend objections to claim(s) of exemption arising from attorney error(s) in Schedule C.

Services Included as Part of Chapter 7 Representation, Subject to an Additional Fee

The following are services, included as part of the representation of the debtor, but for which the attorney may charge additional fees.

- 1. Representation at any continued meeting of creditors due to client's failure to appear or failure to provide required documents or acceptable identification;
- 2. Amendments, except that no fee shall be charged for any amendment to Schedule C that may be required as a result of attorney error;
- 3. Opposing Motions for Relief from Stay;
- 4. Reaffirmation Agreements and hearings on Reaffirmation Agreements;
- 5. Redemption Motions and hearings on Redemption Motions;
- 6. Preparing, filing, or objecting to Proofs of Claims, when appropriate, and if applicable;
- 7. Representation in a Motion to Dismiss or Convert debtor's case;
- 8. Motions to Reinstate or Extend the Automatic Stay;
- 9. Negotiations with Chapter 7 Trustee in aid of resolving nonexempt asset, turnover or asset administration issues.

III.

Additional Services Not Included in the Initial Fee Which Will Require a Separate Fee Agreement

The following services are <u>not</u> included as part of the representation in a Chapter 7 case, unless the attorney and debtor negotiate representation in these post-filing matters at mutually agreed upon terms in advance of any obligation of the attorney to render services. Unless a new fee agreement is negotiated between debtor and attorney, attorney will not be required to represent the debtor in these matters:

- 1. Defense of Complaint to Determine Non-Dischargeability of a Debt or filing Complaint to determine Dischargeability of Debt;
- 2. Defense of a Complaint objecting to discharge;
- 3. Objections to Claim of Exemption, except where an objection arises due to an error on Schedule C;
- 4. Sheriff levy releases;
- 5. Section 522(f) Lien Avoidance Motions;
- 6. Opposing a request for, or appearing at a 2004 examination;
- 7. All other Motions or Applications in the case, including to Buy, Sell, or Refinance Real or other Property;
- 8. Motions or other proceedings to enforce the automatic stay or discharge injunction;
- 9. Filing or responding to an appeal;
- 10. An audit of the debtor's case conducted by a contract auditor pursuant to 28 U.S.C. Section 586(f).

IV.

Duties and Responsibilities of the Debtor

As the debtor filing for a Chapter 7 bankruptcy, you must:

- 1. Fully disclose everything you own, lease, or otherwise believe you have a right or interest in prior to filing the case;
- 2. List everyone to whom you owe money, including your friends, relatives or someone you want to repay after the bankruptcy is filed;
- 3. Provide accurate and complete financial information;
- 4. Provide all requested information and documentation in a timely manner, in accordance with the Chapter 7 Trustee Guidelines;
- 5. Cooperate and communicate with your attorney;
- 6. Discuss the objectives of the case with your attorney before you file;

- 7. Keep the attorney updated with any changes in contact information, including email address;
- 8. Keep the attorney updated on any and all collection activities by any creditor, including lawsuits, judgments, garnishments, levies and executions on debtor's property;
- 9. Keep the attorney updated on any changes in the household income and expenses;
- 10. Timely file all statutorily required tax returns;
- 11. Inform the attorney if there are any pending lawsuits or rights to pursue any lawsuits;
- 12. Appear at the Section 341(a) Meeting of Creditors, and any continued Meeting of Creditors;
- 13. Bring proof of social security number and government issued photo identification to the Section 341(a) Meeting of Creditors;
- 14. Provide date-of-filing bank statements to the attorney no later than 7 days after filing of your case;
- 15. Pay all required fees prior to the filing of the case;
- 16. Promptly pay all required fees in the event post filing fees are incurred;
- 17. Debtors must not direct, compel or demand their attorney to take a legal position or oppose a motion in violation of any Ethical Rule, any Rule of Professional Conduct, or Federal Rule that is not well grounded in fact or law.

Dated:	August 4, 2020	/s/ George C. Hebert	
		George C. Hebert	=======================================
		Debtor	
Dated:	August 4, 2020	/s/ Holly L. Hebert	
		Holly L. Hebert	
		Debtor	
Dated:	August 4, 2020	/s/ Ahren A. Tiller	
		Ahren A. Tiller 250608	
		Attorney for Debtor(s)	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
<u>+</u> \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/Resources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of California revised plan 6/2016

In	George C. Hebert Holly L. Hebert		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	NSATION OF ATTOR	NEY FOR DE	CBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filin be rendered on behalf of the debtor(s) in contemplation of	(b), I certify that I am the attorn g of the petition in bankruptcy,	ey for the above nam or agreed to be paid	ned debtor(s) and that to me, for services ren	dered or to
	For legal services, I have agreed to accept		\$	2,100.00	
	Prior to the filing of this statement I have received		\$	2,100.00	
	Balance Due		\$	0.00	
2.	\$335.00_ of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed comp	ensation with any other person	unless they are mem	pers and associates of	my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				w firm. A
5.	In return for the above-disclosed fee, I have agreed to re	nder legal service for all aspects	s of the bankruptcy c	ase, including:	
	a. Analysis of the debtor's financial situation, and rendeb. Preparation and filing of any petition, schedules, statec. Representation of the debtor at the meeting of credited. [Other provisions as needed]	ement of affairs and plan which	may be required;	-	uptcy;
7.	By agreement with the debtor(s), the above-disclosed fee	e does not include the following	service:		
		CERTIFICATION			
thi	I certify that the foregoing is a complete statement of any s bankruptcy proceeding.	y agreement or arrangement for	payment to me for re	epresentation of the de	btor(s) in
	August 4, 2020	/s/ Ahren A. Tiller			
	Date	Ahren A. Tiller 25 Signature of Attorne			
		Bankruptcy Law (Center		
		1230 Columbia St San Diego, CA 92			
		619-894-8831 Fax Name of law firm	x: 866-444-7026		
_		Traine of war firm			

CSD 1008 [08/21/00] Name, Address, Telephone No. & I.D. No. Ahren A. Tiller 250608 1230 Columbia St., Suite 1100 San Diego, CA 92101 619-894-8831 250608 CA		
UNITED STATES BANKRUPTO SOUTHERN DISTRICT OF CALI 325 West "F" Street, San Diego, Cali	FORNIA	
In Re George C. Hebert Holly L. Hebert		BANKRUPTCY NO.
	Debtor.	
VERIF	ICATION OF CREDITO	PR MATRIX
PART I (check and complete one):		
New petition filed. Creditor diskette required.		TOTAL NO. OF CREDITORS: 24
☐ Conversion filed on See instructions ☐ Former Chapter 13 converting. Creditor of Post-petition creditors added. Scannable ☐ There are no post-petition creditors. No no	<u>liskette</u> required. matrix required.	TOTAL NO. OF CREDITORS:
☐ Amendment or Balance of Schedules filed concurred Equity Security Holders. See instructions on revers ☐ Names and addresses are being ☐ Names and addresses are being ☐ Names and addresses are being	e side. ADDED. DELETED.	le matrix affecting Schedule of Debts and/or Schedule of
PART II (check one):		
The above-named Debtor(s) hereby verifies that the	e list of creditors is true and con	rrect to the best of my (our) knowledge.
☐ The above-named Debtor(s) hereby verifies that the the filing of a matrix is not required.	ere are no post-petition creditor	s affected by the filing of the conversion of this case and that
Date: August 4, 2020	/s/ George C. Hebert	
	George C. Hebert Signature of Debtor	
	G	
Date: August 4, 2020	/s/ Holly L. Hebert Holly L. Hebert	
	Signature of Debtor	
	_	

CSD 1008 (Page 2) [08/21/00]

INSTRUCTIONS

- 1) Full compliance with Special Requirements for Mailing Addresses (CSD 1007) is required.
- 2) A creditors matrix with <u>Verification</u> is required whenever the following occurs:
 - a) A new petition is filed. Diskette required.
 - b) A case is converted on or after SEPTEMBER 1, 2000. (See paragraph 4b concerning post-petition creditors.)
 - c) An amendment to a case on or after SEPTEMBER 1, 2000, which adds, deletes or changes creditor address information on the debtor's Schedule of Debts and/or Schedule of Equity Security Holders. Scannable matrix format required.
- 3) The scannable matrix must be originally typed or printed. It may not be a copy.
- 4) CONVERSIONS:
 - a) When converting a Chapter 13 case filed before SEPTEMBER 1, 2000, to another chapter, <u>ALL</u> creditors must be listed on the mailing matrix at the time of filing and accompanied by a Verification. Diskette required.
 - b) For Chapter 7, 11, or 12 cases converted on or after SEPTEMBER 1, 2000, only post-petition creditors need be listed on the mailing matrix. The matrix and <u>Verification</u> must be filed with the post-petition schedule of debts and/or schedule of equity security holders. If there are no post-petition creditors, only the verification form is required. Scannable matrix format required.
- 5) AMENDMENTS AND BALANCE OF SCHEDULES:
 - a) Scannable matrix format required.
 - b) The matrix with <u>Verification</u> is a document separate from the amended schedules and may not be used to substitute for any portion of the schedules. IT MUST BE SUBMITTED WITH THE AMENDMENT/BALANCE OF SCHEDULES.
 - c) Prepare a separate page for each type of change required: ADDED, DELETED, or CORRECTED. On the REVERSE side of each matrix page, indicate which category that particular page belongs in. Creditors falling in the same category should be placed on the same page in alphabetical order.
- 6) Please refer to CSD 1007 for additional information on how to avoid matrix-related problems.

All-Pro Bail Bonds P.O. Box 131658 Carlsbad, CA 92013

Alliance One 6160 Misson Gorge Road Suite 300 San Diego, CA 92120

Alltran Financial, LP PO Box 610 Sauk Rapids, MN 56379

Ally Financial P.O. Box 380901 Minneapolis, MN 55438-0902

Best Buy / CBNA 5800 South Corporate Place Sioux Falls, SD 57108

Cap1/walmart P.O. Box 30285 Salt Lake City, UT 84130

Capital One Bank P. O. Box 30281 Salt Lake City, UT 84130

Chrysler Capital PO Box 961212 Fort Worth, TX 76161

Citicards CBNA 5800 South Corporate Pl. Sioux Falls, SD 57108

Constar Financial 10400 N. 25th Ave., Ste. 100 Phoenix, AZ 85021

Credit One Bank PO Box 98872 Las Vegas, NV 89193

Franchise Tax Board MS A340 P.O. Box 2952 Sacramento, CA 95812

Freedom Road Financial 1515 W 22nd St., Ste. 100W Oak Brook, IL 60523

GECRB/KTM Retail Finance PO BOX 965001 Orlando, FL 32896

Internal Revenue Service Centralized Insolvency Oper. PO Box 7346 Philadelphia, PA 19101-7346

Kaiser Foundation Health Plan File 50445 Los Angeles, CA 90074

Mechanics Bank FKA CRB PO Box 25805 Santa Ana, CA 92799

Mohela/Dept of ED 633 Spirit Drive Chesterfield, MO 63005

Portfolio Recovery Associates, P.O. Box 12914 Norfolk, VA 23541

Syncb/Living Spaces PO Box 965036 Orlando, FL 32896

Synergetic Communication Inc 5450 NW Central #220 Houston, TX 77092

The Home Depot 5800 South Corporate Pl. Sioux Falls, SD 57108

US Bank PO Box 108 Saint Louis, MO 63166

USCB America 355 S. Grand Ave., Ste. 3200 Los Angeles, CA 90071